



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

HOME VISITS

IN THE CONTEXT OF COVID-19



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ACRONYMS

BMS:	Breastmilk Substitutes	SMART:	Standardized Monitoring and Assessment of Relief and Transitions
COVID-19:	Coronavirus Disease 2019	SMS:	Mobile Phone Text Messages (short message service)
GBV:	Gender-Based Violence	SOP:	Standard Operating Procedure
GNC:	Global Nutrition Cluster	Tech RRT:	Technical Rapid Response Team (now part of the GNC-TA)
GNC-TA:	Global Nutrition Cluster Technical Alliance	UN:	United Nations
GNC-TA-TST:	Global Nutrition Cluster Technical Alliance-Technical Support Team	UNICEF:	United Nations Children's Fund
GTAM:	Global Technical Assistance Mechanism for Nutrition	WHO:	World Health Organization
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		

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

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](#) 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](#) 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.

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.²

Breastfeeding is the most cost-effective intervention to improve child survival. Breastfeeding also gives protection against breast cancer, increases birth spacing, and protects against ovarian cancer and type 2 diabetes. 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.³

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.

Delivering breastfeeding messages consistently during regular home visits by frontline health and nutrition workers and community agents increases breastfeeding rates.⁴ Breastfeeding counselling and support through home visits is also associated with a reduction of early introduction of liquids other than breastmilk in the first three days of life.⁵

2 USAID's Infant and Young Child Nutrition Project: <http://www.iycn.org/about/addressing-urgent-needs/#::-:text=IYCN%20focused%20on%20the%20critical,strong%2C%20healthy%2C%20productive%20future>

3 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.

4 Let's Talk About Breastfeeding: The Importance of Delivering a Message in a Home Visiting Program: https://www.researchgate.net/publication/319251643_Let's_Talk_About_Breastfeeding_The_Importance_of_Delivering_a_Message_in_a_Home_Visiting_Program

5 Systematic review of breastfeeding protection, promotion and support in humanitarian emergencies: <https://www.enonline.net/fex/62/breastfeedinginhumanitarianemergencies>

I. 1.2. Impacts of COVID-19

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 that there have been disruptions/and or reductions in key maternal and child health services in many countries due to COVID-19. A recently published study shows that if mothers with confirmed SARS-CoV-2 infection are given guidance to separate from their newborn babies and avoid or stop breastfeeding, additional deaths among infants would range between 188,000 and 273,000.⁸



Photo Credit: Save the Children, Bangladesh

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

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

8 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)

2. ABOUT THE GUIDELINES

These guidelines are one of a series of guidelines developed by Save the Children, with support from partners like the Technical Rapid Response Team (Tech RRT) (currently the Global Nutrition Cluster Technical Alliance (GNC-TA-TST), and technical input from the members of the Infant Feeding in Emergency (IFE) Core Group and other agencies (Table I).

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

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 Infant and Young Child Feeding \(IYCF\) Support Group Sessions in the Context of COVID-19 \(2021\)](#)**⁹: Intended to provide recommendations and suggests key considerations to continue facilitating IYCF support groups 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 \(2021\)](#)**¹⁰: The guidelines aims to support IYCF counsellors to conduct E-counselling/online counselling in the context of COVID-19.

9 Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Practical Guidelines for Conducting Infant and Young Child Feeding (IYCF) Support Group Sessions in the Context of COVID-19. Available from: www.iycfehub.org/document/practical-guidelines-for-conducting-infant-and-young-child-feeding-iycf-support-group-sessions-in-the-context-of-covid-19.

10 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

Due to the COVID-19 pandemic, home visits and community support to new mothers and their babies have been jeopardized. These guidelines were developed to help frontline health and nutrition workers and community agents to conduct home visits safely.

The specific objectives include:

- Define key considerations for conducting IYCF home visits during the COVID-19 pandemic.
- Provide recommendations when conducting home visits during the COVID-19 pandemic.
- Provide tools/resources for adaptation of an IYCF program in the context of COVID-19.

2.2. Target users

This guidance is developed for use by frontline health and nutrition workers and community agents, including IYCF counsellors who regularly/frequently conduct home visits.



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](#)).



4. IYCF HOME VISITS

Home visits by frontline health and nutrition workers and community agents can identify IYCF needs, provide support, and ensure follow up for mothers and caregivers. Key activities that can be carried out during a home visit include:

- IYCF individual counselling to assist mothers/caregivers that need skilled IYCF support,
- Data collection during assessment/survey periods,
- Monitoring untargeted distribution of BMS, etc., and
- Sharing messages and updates, among others.

4.1. General considerations for IYCF home visits in the context of COVID-19

The following are general recommendations to be considered when planning/conducting IYCF home visits. Always refer to national/sub-national guidelines developed for program adaptations. If not available, please refer to the GNC-TA global IYCF guidelines developed for IYCF program adaptation in the context of COVID-19.¹¹



Photo Credit: Save the Children, Uganda

¹¹ Global Nutrition Cluster (GNC) Technical Alliance: Guidance and Tools for programmatic adaptations by: <https://gtam.nutritioncluster.net/node/34>

4.

Table 2. General recommendations for conducting IYCF home visits

Before the home visit

- Train health and nutrition staff and the community agents conducting IYCF home visits on COVID-19 (e.g., what is COVID-19, its mode of transmission, signs, symptoms, and how to prevent the spread of the virus). Always provide staff with regular updates on new guidance and health and nutrition messages related to the COVID-19 pandemic.
- Ensure adequate supplies of face masks and hand sanitizers are available before home visits, for both staff and the mother and caregivers being visited.
- Laminate relevant social and behavior change communication (SBCC) materials (e.g., counselling cards, job aids, others) to be used during the home visit. They can be regularly cleaned by the staff.
- Allocate resources for staff to buy credits for phone and internet, as remote communication and support may increase depending on the context.
- Each person conducting home visits should have their own copy of the various SBCC materials being used during the visit and should be provided with their own set of other materials depending on the nature of the visit (e.g., dolls, dummy breast if conducting counselling, others).
- Inform households in advance, if possible, that these outlined infection prevention measures will be taken during the home visit. Otherwise, inform them at the start of the visit.
- Plan for your travel. Ideally, the person conducting the home visits lives within the same community. If travelling using local public transportation, please follow relevant recommendations, ensuring that you wear a mask and wash your hands often (using hand sanitizer). As much as possible, avoid crowded public transportation.

During the home visit

- In general, for all activities, always ensure:
 - a. **Physical distancing:** (maintain at least 1-meter distance from other people). Try to conduct activities in ventilated places/outdoors, if feasible.
 - b. **Hand washing:** everyone should wash hands with water and soap for 20 seconds or clean hands with hand sanitizer at arrival and departure.
 - c. **Covering nose and mouth:** for all staff and mothers/caregivers.
 - d. **If mothers/caretakers and/or household members are not feeling well:** reschedule the home visit and/or take actions to ensure a healthcare worker follows up.
- Prioritize the protection of high-risk groups (such as the elderly and people with illnesses like heart disease, hypertension, chronic lung disease, etc.) during the home visit. It is not recommended for high-risk groups to participate during the discussion.
- All hard surfaces (such as chairs and tables) are cleaned before and after each event/meeting with household disinfectants, or at least with soap and water.

After the home visit

- Properly dispose of used materials like facemasks. Clean materials like phones, pens, etc. Wash hands with soap and water or use hand sanitizer.

4. 4.2. Specific recommendations and considerations for IYCF home visits

The following color-coding scheme will be used:

Red: No in-person home visits or only remote support

Orange: Some in-person home visits with precautions and/or remote

Purple: Regular home visits with precautions and remote, if needed

The general considerations/recommendations presented in [Table 2](#) apply for all types of IYCF activities during home visits. The recommendations and considerations below are specific to each IYCF activity during home visits and based on different scenarios.



Photo Credit: Sophie Hamandishe/ Save the Children

Table 3. Specific recommendations for IYCF home visits (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
IYCF individual counselling	<ul style="list-style-type: none"> → Host virtual sessions (e.g., via telephone or online) – please refer to this document for guidance: see resources section below. 	<ul style="list-style-type: none"> → Provide counselling within the compound but outside of the house, while maintaining confidentiality. → If counselling in the house for any reason, maintain physical distancing and ensure the room is ventilated, if possible. → Maintain at least a 1-meter distance from the mother/caregivers (if not able to see breastfeeding attachment, can closely observe for a short time). → Assess if the mother is performing recommended IYCF practices (e.g., attachment and positioning). → Do not touch mother/caregiver or child. → Do not give materials that are not sanitized/disinfected. → Consider a decrease in frequency of follow-ups. → Alternate in-person visits with remote counselling sessions - please refer to this document for guidance: See resources section below. 	<ul style="list-style-type: none"> → Provide counselling within the compound but outside of the house, while maintaining confidentiality. → Wash or sanitize hands before entering and leaving compound. → Assess if the mother is performing recommended IYCF practices (e.g., attachment and positioning). → Do not touch mother/caregiver or child. → Maintain at least 1-meter distance from the mother/caregiver (if not able to see breastfeeding attachment, can closely observe for a short time). → Do not give materials that are not sanitized/disinfected.
Disseminate messages about COVID-19	<ul style="list-style-type: none"> → Consider using radio, TV, mobile phone text messages (SMS), or social media platforms (e.g., WhatsApp, Facebook, others) to reach mothers and caregivers. → If this is possible, please refer to this document for guidance: See resources section below. → Encourage your community leaders to communicate IYCF messages through routine community information channels. 	<ul style="list-style-type: none"> → It is recommended that remote platforms are used for this purpose or limit the visits to the essential ones. Please refer to this document for guidance: See resources section below. → Always ensure you comply with the general recommendations in Table 2. → If in-person visits are necessary, please meet the mother/caregiver outside her home, when possible. → If not possible, ask to be in a room that is well ventilated and allows for physical distancing. → Give basic and relevant messages based on the age of the child. 	<ul style="list-style-type: none"> → Always ensure you comply with the general recommendations in Table 2. → Preferably meet outside the home. → If not possible, meet in a room that is well ventilated, clean, and conducive to physical distancing. → Give basic and relevant messages based on the age of the child. → Ensure you are giving messages about hand washing and safe food preparation.

4.

	No movement/no access/no gatherings or meetings allowed	Limited movement/limited access	No restrictions in place regarding access and movement
Code monitoring	<ul style="list-style-type: none"> → Verify if you can reach women, caregivers, and other community members using SMS or social media platforms (e.g., WhatsApp, Facebook). → If possible, refer to the document: See resources section below. → Please visit the IYCF-E Hub to identify ways of monitoring and reporting Code violations remotely.¹² 	<ul style="list-style-type: none"> → Verify if you can reach women, caregivers, and other community members using SMS or social media platforms (e.g., WhatsApp, Facebook). → If possible, refer to the document: See resources section below. → Please check also the IYCF-E Hub to identify ways of monitoring and reporting Code violations remotely.¹² → Ask information regarding donations of infant formula products or other promotional activities of infant formula products from people outside the house/in common places like hospitals, schools. 	<ul style="list-style-type: none"> → Ask information regarding donations of infant formula products or other promotional activities of infant formula products from people outside the house/in common places like hospitals, schools.
IYCF survey and assessment	<ul style="list-style-type: none"> → Please visit the IYCF-E Hub to identify ways of conducting surveys and assessments remotely.¹² 	<ul style="list-style-type: none"> → In areas with community transmission, postpone/suspend household-level/population-based surveys in line with government guidelines. → Please visit the IYCF-E Hub to identify ways of conducting surveys and assessments remotely.¹² → For SMART and other surveys and assessments, refer to the Interim Guidance on Household Surveys.¹³ 	<ul style="list-style-type: none"> → In areas with community transmission, postpone/suspend household-level/population-based surveys in line with government guidelines. → Please visit the IYCF-E Hub to identify tools for conducting surveys and assessments remotely.¹² → For SMART surveys, refer to the Interim Guidance on Household Surveys.¹³

¹² Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). IYCFE Platform of resources. Available from: www.iycfehub.org

¹³ ACF (2020). Safely Resuming Door-To-Door Surveys: Data Collection and Utilization in the Context of COVID-19. Available from: https://smartmethodology.org/wp-content/uploads/2020/10/Guidance-on-Household-Surveys-during-COVID-19_Final-version.pdf

4.

	No movement/no access/no gatherings or meetings allowed	Limited movement/limited access	No restrictions in place regarding access and movement
Monitoring and evaluation	<ul style="list-style-type: none"> → Please visit the IYCF-E Hub to identify tools for conducting remote monitoring.¹² 	<ul style="list-style-type: none"> → Please visit the IYCF-E Hub to identify tools for conducting remote monitoring.¹² → Conduct in-person visits only when needed, and outside the house. 	<ul style="list-style-type: none"> → Conduct visits outside the house. → Decrease frequency of monitoring.
Referral	<ul style="list-style-type: none"> → Use this document to refer cases that need urgent support: See resources section below . 	<ul style="list-style-type: none"> → Refer cases that need skilled support to health facilities, specifically for: individual counselling, medical cases, people suffering from gender-based violence (GBV), etc., in line with the existing referral pathways. 	<ul style="list-style-type: none"> → Refer cases that need skilled support to health facilities, specifically for: individual counselling, medical cases, people suffered GBV, etc., in line with the existing referral pathways.
Resources to be used for home visits	<ul style="list-style-type: none"> → Please visit the IYCF-E Hub for videos, images, and other resources that can be used remotely.¹⁴ → Please refer to: <i>Practical Guidelines for Conducting Infant and Young Child Feeding (IYCF) Support Group Sessions in the Context of COVID-19</i>. → <i>Practical Guidelines: Conducting and Supporting Infant and Young Child Feeding - e-Counselling via Telephone with Considerations for Planning and Implementation</i>. 	<ul style="list-style-type: none"> → Depending on the purpose of the visit, considering bringing: <ul style="list-style-type: none"> - IYCF Counselling Cards (laminated) - Videos (on phones, devices) - Dolls, dummy breasts (for counselling purposes) - Any other job aid, sample materials 	<ul style="list-style-type: none"> → Depending on the purpose of the visit, considering bringing: <ul style="list-style-type: none"> - IYCF Counselling Cards (laminated) - Videos (on phones, devices) - Dolls, dummy breasts (for counselling purposes) - Any other job aid, sample materials

5. ANNEXES

Annex I. General COVID-19 recommendations¹⁴

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.

¹⁴ 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.



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).¹⁵
- 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.

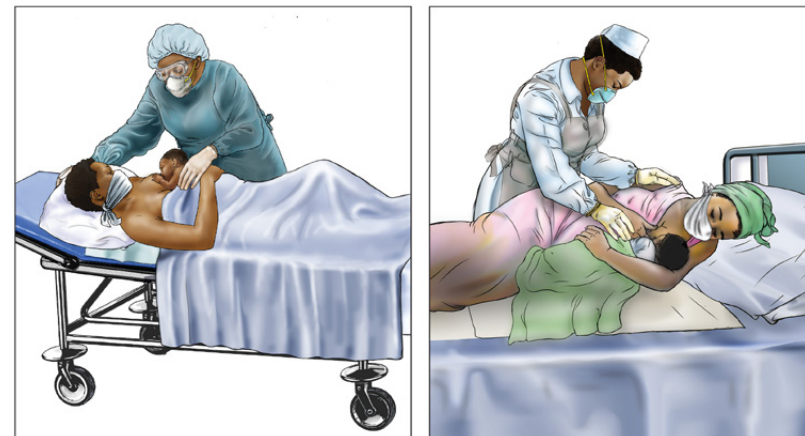
Infant and young child feeding (IYCF) support in the context of COVID-19 remains a critical nutrition intervention for the protection and support of pregnant women, caregivers, and their young children. WHO and UNICEF advise caregivers and families with suspected or confirmed COVID-19 to continue the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



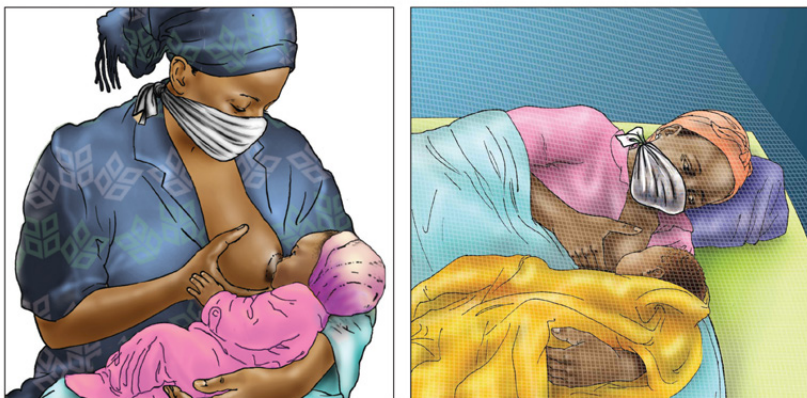
Taken from UNICEF and USAID IYCF Counselling Cards in the Context of COVID-19¹⁷.

¹⁵ 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-19¹⁷.

Alternatives to breastfeeding

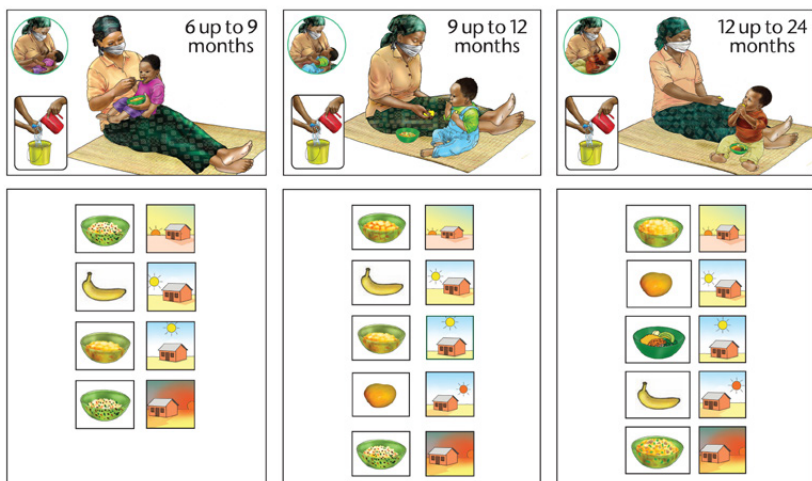
- If the mother is not able to breastfeed or express breast milk, look for other safe alternatives for the newborn/infant that are in line with national policies, culturally and socially accepted by the mother and family.
- Wet-nursing (where another woman breastfeeds the child), or donor human milk, if available) are the preferred options, where culturally and socially acceptable ([see the WHO decision tree for breastfeeding in context of COVID-19](#)). 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.

5.

Practice safe complementary feeding



Taken from UNICEF and USAID IYCF Counselling Cards in the Context of COVID-19¹⁷.

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-19¹⁷.

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. Caramericas (2020). Care Group Lessons for COVID-19. Available from: <https://www.fsnnetwork.org/resource/curamericas-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. Community Engagement in the Context of COVID-19: <https://www.nutritioncluster.net/node/11031>
4. WHO (2020). Coronavirus disease (COVID-19) advice for the public. Available from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>
5. 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>
6. Global Nutrition Cluster Technical Alliance (2020). Guidance and Tools for programmatic adaptations during the COVID-19 pandemic. Available from: <https://gtam.nutritioncluster.net/node/34>
7. 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>
8. 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>
9. Save the Children and 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>
10. Save the Children and Tech RRT (2020). IYCF-E Standard Operating Procedure (SOP) for Emergency Response Teams. Available from: <https://www.enonline.net/iycfesopforemergencyteams>
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, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). IYCFE Platform of resources. Available from: www.iycfehub.org
14. 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>
15. 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>
16. Save the Children, IFE Core Group, ENN, USAID, ACF USA, PATH, SafelyFed Canada (2021). Practical Guidelines for Conducting Infant and Young Child Feeding (IYCF) Support Group Sessions in the Context of

- COVID-19. Available from: www.iycfehub.org/document/practical-guidelines-for-conducting-infant-and-young-child-feeding-iycf-support-group-sessions-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 (2020). Breastfeeding and COVID-19 video social media toolkit. Available from: <https://www.who.int/pmnch/media/videos/breastfeeding-covid19-video-socialmedia-toolkit.pdf?ua=1&ua=1>
 21. UNICEF (2013). Counselling cards for community health workers. Available from: https://www.unicef.org/nutrition/files/counseling_cards_Oct_2012small.pdf
 22. UNICEF (2013). IYCF key message booklet. Available from: 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

