BACKGROUND

From 1980 to 2010, the Philippines was hit by 363 disasters, affecting more than 11.6 million persons, an average of 3.7 million people a year, and killing 39,956. The most common disasters were floods (94), storms (197), volcano eruptions (14), earthquakes (12) and epidemics (10).¹

The IFE Core Group (of which UNICEF and WHO are members), developed the Operational Guidelines on IYCF in Emergencies.² The guidelines reaffirm the importance of supporting breastfeeding in difficult situations, ensuring that donations of breast milk substitutes are not collected and procuring only the minimal amount of infant formula necessary through the emergency coordinating mechanism.

The existing policies in the Philippines are aligned with the recommendations of the IFE Core Group. The IRR of Executive Order 51 (May 2006) prohibits the donation of covered products, and Administrative Order 2007-0017 (July 2007) states: “Infant formula, breast-milk substitutes, feeding bottles, artificial nipples and teats shall not be items for donation.”³

Typhoon Yolanda (Haiyan) hit the Philippines on November 8, 2013 leaving a trail of massive destruction. Of the 16M people affected, there are 235,245 pregnant and 156,830 lactating women⁴ and an estimate of 145,000⁵ children below the age of 5. Among displaced populations in emergency situations, malnourished children under three are more likely to die than the rest of the population⁶. Thus, providing proper support to ensure optimal nutrition the Infant and Young Child Feeding in Emergencies (IYCF-E) strategy is of primary importance.

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⁴ DSWD DROMIC Report, 6am, 16 November 2013 as Reported in WHO Situation Report Number 2 for Typhoon Haiyan
⁶ Module 1 on Infant Feeding in Emergencies, v1.1, December 2007, for health and nutrition workers in emergency situations. Available at: www.ennonline.net/ife
In response to this, the Philippines has activated the National Nutrition Cluster, led by the Department of Health through the National Nutrition Council (NNC) and the UNICEF, as the IASC Focal agency. The National Nutrition Cluster in turn has established an IYCF-E Technical Working Group for the Typhoon Yolanda (Haiyan) emergency. The Nutrition Cluster members and the IYCF-E TWG are guided by the Philippine National IYCF Policy (A0-2005-0014) and the IYCF Strategic Plan of Action 2011-2016 (DC-2011-0278) that aims to improve the nutritional status and health of children and especially the under three years old and consequently reduce infant and under 5 mortality.

The priority of the Nutrition Cluster Strategic Response Plan (SRP) is to protect, promote and support optimal feeding practices among children. For the post-Yolanda response, this refers to eight provinces of three affected regions. The practices known to save lives include:

- Initiation of breastfeeding within the first hour of birth
- Exclusive breastfeeding (ONLY breastmilk) from immediate postpartum to 6 months of age
- Continued breastfeeding (at a high level) up to two years and beyond
- Introduction of safe and appropriate complementary foods from 6 months of age

**OBJECTIVES**

1. To develop operational guidelines on IYCF-E
2. To advise the Strategic Advisory Group on compliance issues connected with application of the agreed standards and guidelines
3. To provide supportive supervision to regional nutrition and sub-clusters

**MEMBERSHIP**

The IYCF-E TWG shall be chaired by the Family Health Office of the Department of Health, and co-chaired by Save the Children.

Group Members:

1. National Nutrition Council – Central Office and National Capital Region
2. Department of Social Welfare and Development (NCR) including Camp Management Cluster
3. Center for Health Development – National Capital Region
4. Health Emergency Management Staff, Department of Health
5. UNICEF
6. Save the Children
7. World Food Programme
8. World Health Organization
9. ACF International
10. Plan International
11. Kalusugan ng Mag-Ina, Inc.
12. Helen Keller International
13. Arugaan
14. Philippine Pediatric Society
15. Philippine Red Cross (PRC)
16. LATCH, Inc.

Each organization will nominate a permanent focal person (and one alternate) to ensure consistency in representation and facilitate communication. Group members will agree to regularly attend IYCF-E group meetings, endorse the IYCF-E group ToR and work plan, and abide by the ToR and fully implement the work plan.

Group Observers: Stakeholders not directly engaged in the delivery of IYCF-E programming are welcome to attend sub-group meetings but they will have an observer status within the group. No infant formula companies and its subsidiaries will be allowed in as observers to the IYCF-E working group. Likewise no organization that receives support from any of the above companies shall be allowed to participate.

MEETING FREQUENCY AND MINUTES

Meetings will be undertaken Fridays of every week, during the acute stage and once every two months thereafter during the non-acute stage. Meetings are to be held at the National Nutrition Council Central Office. Should there be changes on the schedule and venue, members shall be informed accordingly.

Each meeting shall be presided by the IYCF-E chair; in his absence, by the Vice Chair. The IYCGF-E Secretariat will take down minutes of the meeting and circulate to members for review. The final minutes shall be discussed and approved by the body at the start of each subsequent meeting.

REPORTING

The IYCF-E TWG shall give an update on the actions taken and other related information at every Nutrition Cluster meeting and/or in other appropriate forum.

Minutes and key documents should be made available in hard copies at all meetings posted online at philippines.humanitarianresponse.info
ACTIVITIES

1. Working group members will agree on the specific policy and guidelines on IYCF-E to be adopted for the emergency operation. This policy should include the following:
   
   a. Protection, promotion and active support of early, exclusive and continued breastfeeding
   
   b. Safe, adequate, appropriate, and well-timed complementary feeding
   
   c. Preventing of donations/handling of donations that were not prevented such as infant formula, milk supplements and other breastmilk substitutes, bottles, and teats in emergencies
   
   d. Appropriate procurement, management, distribution, preparation and use of breastmilk substitutes, milk products, commercial baby food, and infant feeding equipment when all options have been exhausted to ensure breastmilk feeding

2. Provide supportive supervision to regional clusters and sub-clusters:
   
   a. Ensure technical support to address regional and local needs
   
   b. Participate in regional and sub-regional cluster meetings as per need
   
   c. Review regional and sub-regional cluster activities and reports


4. Identify and agree key priorities for the IYCF-E Technical Working Group action/work plan for twelve months and mainstreaming to health and nutrition program. This should identify agency responsibilities and mechanisms for accountability.

5. Represent the IYCF-E agenda/policy within their agencies plans, the National Nutrition Cluster, and other forums.

6. Include infant and young child feeding practices in rapid needs assessment, to guide and enable action and quick response. Support monitoring and evaluation activities.