





Joint Statement

Protecting Maternal and Child Nutrition in the Ukraine Conflict and Refugee Crisis

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UNICEF, the Global Nutrition Cluster, and Partners call for ALL involved in the response to the Ukraine Conflict Crisis to protect, promote, and support the feeding and care of infants and young children and their caregivers. This is critical to support child survival, growth, and development and to prevent malnutrition, illness, and death.

This joint statement has been issued to help secure immediate, coordinated, multi-sectoral action on infant and young child feeding (IYCF).

The expansion of the conflict is projected to deepen and increase humanitarian needs for millions of Ukrainians. Refugees, families displaced within the Ukraine and those affected by conflict in their place of residence are likely to be in an extremely difficult situation facing high levels of stress and uncertainty, food shortages, unsanitary conditions, risk of communicable diseases, and significant protection threats.

Globally Recommended Infant and Young Child Feeding Practices

- 1. Early initiation of breastfeeding (putting baby to the breast within 1 hour of birth)
- 2. Exclusive breastfeeding for the first 6 months (no food or liquid other than breastmilk, not even water unless medically indicated)
- **3.** Introduction of age-appropriate, safe, and nutritionally adequate **complementary feeding** from 6 months of age; and
- 4. Continued breastfeeding for 2 years and beyond.

In all emergencies, the youngest children are at the highest risk of illness and mortality. Infants who are not breastfed are especially vulnerable, as the normal environment for accessing and hygienically preparing infant formula is disrupted. This is a concern in the Ukraine, where rates of exclusive breastfeeding are low, and a high percentage of infants are partially or fully dependent on infant formula.

Interventions to support mothers, caregivers and their children should consider:

1. Support mothers to initiate and continue breastfeeding, as a priority to help protect their health and well-being and that of their infants. Although stress can temporarily interfere with the flow of breast milk in some women, it is not likely to inhibit breast milk production, provided mothers and infants remain together and are supported to initiate and continue frequent breastfeeding. This support entails practical support with attachment and positioning for breastfeeding, confidence building, facilitating skin to skin contact and keeping mother and infant together (e.g., provide baby carriers/slings). It is recommended to draw upon existing breastfeeding support organisations and individual lactation professionals from Ukraine and surrounding countries.

- 2. Support and protect the nutritional needs of infants and young children who are not breastfed and minimize the risks they are exposed to. Infants who are exclusively dependent on infant formula are highly vulnerable in conflict situations and should be urgently identified, assessed, and supplied with a package of essential support including adequate Breast Milk Substitute (powdered infant formula or ready to use infant formula) supply, equipment and supplies for hygienic storage, preparation and cup feeding, practical training on hygienic preparation and storage, counselling on responsive feeding and regular follow up at UNICEF Blue Dot Hubs, Red Cross, and other service providers. Mothers who are mixed feeding should be encouraged and supported to increase their breastmilk supply and/or return to exclusive breastfeeding.
- 3. In accordance with Ukraine regulation¹ do not call for, support, accept or distribute donations of Breast Milk Substitutes, including infant formula, other milk products, commercial complementary foods, and feeding equipment (such as bottles, teats, and breast pumps). Required BMS supplies should be purchased (by the caregiver or procured by UNICEF) and provided as part of a sustained package of coordinated care based on assessed need and should be Code-compliant. Donor human milk should not be sent unless based on an identified need and in coordination with state/local medical authorities or UN agencies coordinated intervention that must include a functional cold chain.
- 4. Ensure the availability and continuity of nutritious, fresh food and essential staples for children, women, and families. Where there are identified shortfalls in local access and availability of foods, facilitate access to age-appropriate and safe, complementary foods for children 6-23 months, older children, and for their caregivers, with particular attention to pregnant and breastfeeding women.
- 5. Ensure pregnant and breastfeeding women, and other caretakers of young children have priority access to food and non-food items including appropriate clothing, water, protection, accommodation, psychosocial support and other interventions to meet their essential needs. Consider how women in transit can be supported to minimise distress during their journey. At all service points, provide safe and comfortable spaces for mothers to feed and care for their infants.
- **6. Identify higher risk infants, children, and mothers and respond to their needs.** These include (but are not limited to) low birth weight infants; malnourished children, including infants under 6 months of age; children with disabilities; issues with feeding; HIV exposed infants; orphaned infants; mothers who are malnourished or severely ill; mothers who are traumatised; instances where mothers are separated from their children.

We encourage you to orientate your staff to raise awareness of the contents of this position statement.

Please contact Anna Ziolkovska, Nutrition Specialist, Global Nutrition Cluster for more information. aziolkovska@unicef.org

Annex 1: Resources

- IYCF-E infographic series | ENN (ennonline.net)
- BMS-Procurement-Guidance-Final-June-2021.pdf (unicef.org)
- · Breastfeeding-counselling-in-Emergencies-2021.pdf (globalbreastfeedingcollective.org)
- · Community based infant and young child feeding | Global Breastfeeding Collective
- Breastfeeding in emergency situations | Global Breastfeeding Collective
- Call to Action: Breastfeeding Counselling in Emergencies
- Supportive Spaces for IYCF-E
- https://www.nutritioncluster.net/Ukraine Response Programmatic and technical response

^{1 &}quot;Preventing the spreading of artificial breast-milk substitutes is defined by the Order of the Ministry of Health of Ukraine as of October 28, 2011 No. 715 "On Further Introduction of Hospital Favourable to a Child Expanded Initiative in Ukraine".