



Statement of the Ministry of Public Health of Islamic Republic of Afghanistan

Call for support for appropriate infant and young child feeding, and avoiding unsolicited donation and distribution of infant formula and breastmilk substitutes in Afghanistan under the current COVID-19 Pandemic context May 2020

The Ministry of Public Health (MOPH), in collaboration with UNICEF, WHO, WFP, FAO, ACF, Save the Children, and all Nutrition Cluster partners of Afghanistan call to protect, promote, and support for safe and appropriate infant and young child feeding during the current COVID-19 emergency and caution against the unnecessary and harmful donation, distribution and use of milk powder, infant formula and soya milk (powder/liquid).

In this current COVID-19 emergency, the health and nutrition of all infants and young children are particularly threatened and placed at a higher risk. The risk of mortality is particularly high because of the combined impact of a greatly increased prevalence of communicable diseases/sanitary related diseases such as diarrhea, and the possible increase in rates of malnutrition. This is particularly more so in Afghanistan with several aggravating factors including food insecurity.

The global strategy for infant and young child feeding states that, “Infants and children are among the most vulnerable victims of natural or human-induced emergencies. There is a common misconception that in emergencies, many mothers can no longer breastfeed adequately due to stress or inadequate nutrition. Interrupted breastfeeding and inappropriate complementary feeding heighten the risk of malnutrition, illness and mortality.” As WHO guidelines emphasized, creating sustained environment that encourages exclusive breastfeeding for infants up to 6 months of age, and appropriate complementary feeding and continued breastfeeding for children at 6 months of age up to 2 years old and beyond must be promoted, protected, and supported with integrated health, non-health multisectoral interventions. Thus, MOPH calls for support for appropriate infant and young child feeding and avoiding unsolicited donation of breastmilk substitute in Afghanistan under the current COVID-19 Pandemic.

Breastfeeding provides critical protection from infection in emergency environments. In accordance with The Regulation of the Protection and strengthening of Child Feeding by Breastmilk Act of Afghanistan, as well as international guidance, **donations, procurement, and promotion of infant formula, or any other milk products (powdered or liquid) milk, including soya milk liquid/powder, infant foods and bottles and teats should not be made to either health facilities or the community.** The use of feeding bottles only adds further to the risk of infections as they are difficult to clean properly and to regularly disinfect.

The experience with past emergencies in Afghanistan as well as elsewhere has shown an excessive quantity of such products, which are poorly targeted, endanger infants' lives and often discourages mothers to breastfeed, and subsequently undermine the life-saving practice and culture of breastfeeding. Any use, donations, acceptance of donations, procurement, and promotion of such products should be based on a careful needs assessment for which the Ministry of Public Health, with the technical support of partners carries out under strict conditions after other alternatives such as re-lactation, wet nursing, and donated breastmilk are not feasible. If needed, products should adhere to the Codex Alimentarius Standards and The Regulation of the Protection and strengthening of Child Feeding by Breastmilk Act of Afghanistan.

Early initiation & Exclusive Breastfeeding from birth to 6 months of age

Almost all mothers initiate breastfeeding in Afghanistan. Yet, it is critical that all mothers continue to breastfeed as per WHO recommendations under the COVID-19 circumstances:

- Start breastfeeding infants within one hour of birth and continue exclusively breastfeeding until six months of age (180 days). No food or liquid other than breast milk - not even water- is needed to meet an infant's nutritional and fluid requirements during the first six months of life.

As per current WHO recommendations, women with COVID-19 can breastfeed by practicing respiratory hygiene during feeding, such as wearing a mask; washing hands before and after touching the baby; and cleaning and disinfecting surfaces routinely. Women too unwell to breastfeed, should be supported to safely provide their babies with breastmilk in a possible, available and acceptable measures, including expressing breastmilk, receiving targeted skilled support for re-lactation, and connecting to donor human milk if available.

During the current COVID-19 context, conditions that facilitate breastfeeding must be created to ensure privacy through the establishment of safe corners/havens for mothers and infants, one-to-one counselling and mother-to-mother supports. It is critical to encourage and support mothers to initiate breastfeeding immediately after delivering their child and to continue exclusively breastfeeding the infant up to six months of age. While greater emphasis on personal/respiratory hygiene measures is directed to the breastfeeding mothers infected with COVID-19, these personal/respiratory hygiene measures and overall COVID-19 risk reduction measures must be practiced by all involved in promoting and protection of breastfeeding and by all mothers/caretakers.

Feeding of the non-breastfed child less than six months of age

The first choice of feeding methods for infants less than six months of age who are not breastfed should be re-lactation (re-starting breastfeeding). If this is not possible or when artificial feeding is indicated by skilled staff such as health providers or infant feeding counselors, infant formulas are necessary and must be used under strict medical control, accompanied by training on hygiene, preparation and use (including how to feed with a cup or use supplementary suckling techniques supported by a trained person) to minimize their associated risks. **Using products such as infant formula, other milk products and soya milk liquid/powder in an emergency carries high risks of malnutrition, disease and endangers lives and is a last resort only when other safer options have first been fully explored.**

Complementary feeding of children above six months of age

Children from the age of six months require nutrient-rich, age-appropriate and safe complementary foods in addition to breast milk. Priority should be placed on locally available, culturally acceptable, nutritionally adequate and age-appropriate, diverse, clean and safe foods.

- At least four variety of food groups (grains, protein like pulses, meat, and fruits and vegetables) a day. In general, young children should be fed about 2-4 times a day depending on their age with a quantity of about 2 tablespoons to 250 ml cup per meal, based on the age.

Care takers should be able to prepare and feed young children through improved complementary food recipes and cooking demonstrations, using locally available, diverse foods. Attention should also be given to reduce mother's workload and allow time for preparing and feeding properly young children.

It is important to recognize that during the COVID-19 pandemic, food availability and accessibility may be limited for families, where pregnant and lactating women (PLWs) and young children are particularly vulnerable. Eating a wide variety of foods is important to ensure the body receives adequate amounts of micronutrients, which is critical to overall immunity. Food rations under general food distribution should include protein sources (pulses, meat, fish, eggs) and fresh fruits and vegetables as much as possible and avoid any form of breast milk substitute products, and packaged, processed foods.

To prevent unnecessary disease and death of infants and young children associated with all form of breast milk substitutes, MOPH strongly urges all government and partners to comply with the guidelines provided to protect, promote and support optimal breastfeeding (early and exclusive) and age-appropriate and safe complementary foods and feeding practices as critical component of the programming and response for young children in the context of COVID-19.

H.Excellency

Name & Signature of Minister
Minister of Public Health

