



## Infant Feeding in Emergencies Core Group

### 2024 Annual Meeting

22–24 October 2024

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## Acronyms

<b>AI</b>	Artificial intelligence
<b>ACF</b>	Action Against Hunger
<b>BMS</b>	Breastmilk substitutes
<b>CFE</b>	Complementary feeding in emergencies
<b>ENN</b>	Emergency Nutrition Network
<b>GCFC</b>	Global Complementary Feeding Collective
<b>GNC</b>	Global Nutrition Cluster
<b>GTWG</b>	Global thematic working group
<b>IBFAN</b>	International Baby Food Action Network
<b>IFE</b>	Infant feeding in emergencies
<b>IFE-CG</b>	Infant Feeding in Emergencies Core Group
<b>IMC</b>	International Medical Corps
<b>IYCF</b>	Infant and young child feeding
<b>IYCF-E</b>	Infant and young child feeding in emergencies
<b>MAMI</b>	Management of small and nutritionally at-risk infants under six months and their mothers
<b>MIYCF-E</b>	Maternal, infant and young child feeding in emergencies
<b>MTR</b>	Mid-term review
<b>NGO</b>	Non-governmental organisation
<b>OCHA</b>	Office for the Coordination of Humanitarian Affairs
<b>OG-IFE</b>	Operational Guidance on Infant Feeding in Emergencies
<b>SC</b>	Steering Committee
<b>SCI</b>	Save the Children International
<b>TF</b>	Task force
<b>WHO</b>	World Health Organization
<b>WG</b>	Working group
<b>UN</b>	United Nations
<b>UNFPA</b>	United Nations Population Fund
<b>UNICEF</b>	United Nations Children’s Fund
<b>UNHCR</b>	United Nations High Commissioner for Refugees
<b>USAID</b>	United States Agency for International Development

## Acknowledgements

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## Meeting overview

The Infant Feeding in Emergencies Core Group (IFE-CG) 2024 annual meeting was hosted by the Emergency Nutrition Network (ENN) and held virtually with remote participation over three days (22, 23 and 24 October 2024). The meeting was facilitated by IFE-CG and Steering Committee (SC) members. The meeting agenda can be found in [Appendix 1](#).

The main objectives of this annual meeting were to:

- 1) Review and reflect on IFE-CG progress during 2024;
- 2) Identify priority areas and actions for the 2025 workplan to be delivered by the IFE-CG collective, based on the IFE-CG strategy and action plan; and
- 3) Set the basis for the next IFE-CG strategy period (2026–2031) using the redefinition of the IFE-CG and outcomes of the 2024 mid-term review (MTR) follow-up face-to-face meeting in August 2024 and annual meeting discussions.

The main outputs of the meeting were:

- The generation of key priority areas that would serve as the basis for the 2025 workplan; and
- The generation of a meeting report with key actions identified.

Each day consisted of a morning (AM) session (9.30am–12.30pm UK time) and an afternoon (PM) session (2.00–5.00pm UK time) to accommodate members in different time zones. The same content was covered in both the AM and PM sessions, although an update was provided in the PM session on discussions that had happened in the AM session to facilitate continuity between the sessions.

A total of 45 individuals (41 IFE-CG members, two invited presenters and two ENN staff) attended the meeting across the three days; see [Appendix 2](#) for a full list of participants.

Day 1 consisted of five sessions. Session 1 was a presentation on 25 years of the IFE-CG, with the purpose of information sharing and celebrating this anniversary and the IFE-CG's achievements. Session 2 involved sharing a full update on outcomes of the MTR follow-up face-to-face meeting held in August 2024. Session 3 was a presentation of progress against the 2024 workplan. Session 4 consisted of presentations from IFE-CG working groups (WGs) and task forces (TFs) housed under the IFE-CG (webinars WG, infographics WG, glossary TF and infectious diseases TF), where each highlighted the planned way forward and activities for 2025. In session 5, members were presented with a first draft of the proposed 2025 workplan.

Day 2 consisted of three sessions. Session 6 was a continuation of a review of the proposed 2025 workplan. Session 7 was on complementary feeding in emergencies (CFE), which involved information sharing from United Nations Children's Fund (UNICEF), discussions on members' planned contributions in the CFE subsector, and the role the IFE-CG could play in CFE moving forward. The IFE-CG communications strategy and workplan were discussed in session 8, with the aim of getting direction from members on the most important priorities

for 2025. There was also an update provided on the Infant and Young Child Feeding in Emergencies (IYCF-E) Hub.

Day 3 had three sessions. Session 9 discussed maternal nutrition, where preliminary work done on maternal nutrition was presented and feedback was solicited on what, if any, the IFE-CG's role should be in maternal nutrition moving forward. Key priorities and recommendations from the 2024 IFE-CG annual meeting were outlined in session 10, summarising discussions and insights from days 1 and 2. In session 11, the SC shared plans for 2025, including development of the next IFE-CG strategy. Information from the reflections and parking lot board (hosted on Mural) were also discussed.

Throughout the three days, 5–10-minute slots were integrated into the agenda to allow space for IFE-CG members to voluntarily provide updates on the work they are doing in IYCF-E, from an organisational or independent perspective. Presentations and materials from the meeting can be found in [Appendix 3](#).

## Day 1

### Welcome, registration and overview of meeting objectives and agenda

**Facilitator: Dima Ousta**

See slides 1–11 in the slide pack [here](#)

Dima welcomed participants. She highlighted who the members of the IFE-CG were, including the SC. She also introduced and thanked the ENN team that worked behind the scenes to make the meeting possible. The IFE-CG's donors, the United States Agency for International Development (USAID) and Ireland, were acknowledged for their generous funding to the IFE-CG. Dima presented the agenda with a breakdown of the sessions and the meeting objectives. She also oriented the afternoon session participants on the use of the Mural board.

Nicki Connell (ENN Infant Feeding in Emergencies (IFE) Project Lead) provided an update that both her and Dima would be going on maternity leave and would be away for the better part of 2025. Plans are underway to provide maternity cover.

### Session 1: 25 years of the IFE-CG

***Purpose: Information sharing, celebrating 25 years of IFE-CG achievements***

**Facilitator: Karleen Gribble**

See slides 12–61 in the slide pack [here](#)

Karleen shared the history of the IFE-CG and how the group came to be (from 1996 to present day), including highlighting several key resources/outputs over the years.

### Session 2: Outcomes of the MTR follow-up face-to-face meeting

***Purpose: Share a full update on outcomes of the face-to-face meeting, including updated statements and agreed way forward, and provide a space for initial reactions and parking lot board for reflections***

**Facilitators: Alessandro Iellamo and Caroline Abla (AM session); Caroline Abla and Fatmata Sesay (PM session)**

See slides 62–86 in the slide pack [here](#)

Caroline presented the outcomes of the MTR follow-up face-to-face meeting that took place on 13 to 15 August 2024 in Oxford, UK. There were 17 participants over the course of the three days, including SC members, donors and United Nations (UN) and non-governmental organisation (NGO) partners. Caroline shared a recap of the process starting from the MTR conducted in 2023 to the MTR follow-up face-to-face meeting. The purpose of the MTR was to take stock and critically examine what the IFE-CG is doing and how it is doing it, what has worked and what has not, and whether the needs and challenges that were present when the IFE-CG strategy for the period 2020–2024 was developed remain relevant or whether new needs, challenges and, indeed, opportunities have emerged. The [IFE-CG MTR](#) process involved an online survey, internal and external key informant interviews and focus group discussions; this process was led by ENN consultant Caroline Abla. Five key priorities came out of the MTR:

1. Articulate a clear vision, purpose and mission statement based on what the IFE-CG does and does not do, detailed roles and responsibilities of the SC, and all members.
2. Clarify the IFE-CG and Global Nutrition Cluster (GNC) working relationship.
3. Promote, encourage and support regional UN/NGO entities to engage on day-to-day IFE work at the regional or country level.
4. Understand current IFE-CG membership and assess who else should be considered to join the IFE-CG membership structure.
5. Strengthen advocacy and communication; review and finalise the communication strategy; include advocacy and communication specialists in the IFE-CG.

The following were the key points examined during the MTR follow-up face-to-face meeting:

1. Discussed who we are, including the mission, vision and purpose of the IFE-CG.
2. Articulated what the IFE-CG's areas of work are and its priorities, including what it does/does not do.
3. Reviewed IFE-CG membership criteria. Clarified the roles/responsibilities of each member as it pertains to IFE at global, regional and country level, and the role of the SC.
4. Reviewed the relationship with the GNC, identifying complementarity and addressing overlap.
5. Discussed global mechanisms and how the IFE-CG can relate to them, as well as what other entities the IFE-CG should prioritise engagement with.

Outcomes of the MTR follow-up face-to-face meeting were:

1. Revised statements for who we are, and the mission, vision and purpose of the IFE-CG.
2. Agreed to remain the global thematic working group (GTWG) of the GNC on IYCF-E and to review the GTWG terms of reference ensuring IFE-CG independence.
3. Agreed on what the IFE-CG does and does not do.
4. Membership – ensure that the right people are involved in the work that needs to be done.
5. Roles of members (UN, donors, NGOs, etc.) defined.
6. Prioritised other groups that the IFE-CG should engage with.

Maternal nutrition was also discussed as an emerging issue and whether the IFE-CG should engage with this area moving forward. The MTR follow-up face-to-face meeting outcomes and recommendations report will be finalised and shared with the SC for approval in due course before dissemination to IFE-CG members (note that this is now done and the [IFE-CG MTR F2F Meeting Outcomes Final November 2024](#) is available on the IFE-CG external SharePoint).

### Session 3: Progress against the IFE-CG 2024 workplan

**Purpose:** *Share progress against the IFE-CG 2024 workplan with IFE-CG members*

**Facilitator:** Dima Ousta

**See slides 90–144 in the slide pack [here](#)**

Dima shared progress against the IFE-CG 2024 workplan, highlighting all outputs and activities. Many of the activities have been completed, with some activities ongoing and still



in progress. Additionally, a few activities have been discontinued for various reasons such as due to a lack of funding (e.g. A.3.1 – disseminate the 10 years of progress report) or have been delayed in starting due to various reasons such as the conflict escalation in Lebanon (e.g. B.1.4 – development of a ‘how to’ guide for the Operational Guidance on Infant Feeding in Emergencies (OG-IFE) to be translated to national guidelines).

Considering the current IFE-CG Coordinator (Dima Ousta) and the ENN IFE Project Lead (Nicki Connell) will be away on maternity leave in 2025, it was agreed to not add on any significant new activities to the IFE workplan for 2025 where avoidable but rather to maintain what is in the current workplan for continuity and stability.

## Session 4: Presentations from IFE-CG WGs and TFs on way forward for 2025

**Purpose:** *Information sharing, highlighting planned way forward and activities for 2025 for WGs*

**Facilitators:** Alessandro Iellamo (webinars WG), Raye Menezes (infographics WG), Caroline Aba (glossary TF), Cecile Basquin (infectious diseases TF)

See slides 145-146 in the slide pack [here](#)

The webinars WG, infographics WG, glossary TF and infectious diseases TF provided updates on the progress made in 2024, and the next steps/plans for 2025.

## Session 5: Review proposed 2025 IFE-CG workplan (part 1)

**Purpose:** *Present draft 2025 IFE-CG workplan for members to provide feedback on*

**Facilitators:** Karleen Gribble (AM) and Sarah O’Flynn (PM)

See slides 148–170 in the slide pack [here](#)

The draft 2025 IFE-CG workplan was presented and an explanation given on how the 2024 IFE-CG workplan was used to create this first draft.

- 24 activities were maintained (continued).
- Three activities were removed due to completion or lack of funding.
- Seven activities are to be added or adapted significantly based on MTR discussions.

A Q&A session was then opened for reflections. In summary:

1. We must ensure there is space in the workplan for emerging issues related to responding to emergencies (escalated requests).
  - There is activity B.1.3 ‘Develop new guidance or update existing guidance based on emerging urgent needs identified in an active emergency’, which allows for the development of stopgap guidance at least.
  - Recognition that the activity ‘Develop new guidance or update existing guidance based on emerging urgent needs identified in an active emergency’ covers a lot. Suggestion to expand the definition further to ‘Support development of needed resources’ or something similar, to broaden the scope of this activity beyond stopgap guidance.
2. We must include a space for looking at the role of technologies for the IFE-CG, e.g. the use of artificial intelligence (AI). This might not need to be an activity in the workplan, but

could instead be a one-off special session similar to the 'Conflicts of Interest and IYCF-E' special session held earlier in 2024 exclusively with IFE-CG members.

3. We need to be better at reaching those who can benefit from the support network of the IFE-CG and emphasise why infants need to be on the agenda in every disaster. Currently, we only engage with those already in the IYCF-E space.
  - We need to expand our efforts to tie in to other responders in other siloes, in particular midwives and those that support birth in emergency and humanitarian settings; we need to identify how to do this.
  - We produce so many deliverables and tools; we need to make sure we direct more effort toward dissemination to ensure they reach our target audiences (including translation into various languages).
  - Members asked why the Office for the Coordination of Humanitarian Affairs (OCHA) is an organisation we want to liaise with more when OCHA focuses on coordination and is not involved in technical topics and programming. It could be because of the point raised earlier around reaching people outside of the IYCF-E space.
  - One of the implications is that we need to be scrupulous in our own organisations' communications. For instance, it is not uncommon to see statements such as "stress/undernutrition is impacting breastfeeding in situation X" in updates from the bigger global organisations, which can lead to risky responses that do not incorporate optimal IYCF-E principles.
  - A simple flyer/one-pager made for disaster responders on why IFE (and IYCF-E in general) is a big issue in earthquakes, floods, conflicts, population movements, tsunamis etc. would be useful and would help explain why they need to think of IFE.

## Member updates: Day 1

***Purpose: Opportunity for IFE-CG members to share updates throughout the meeting***

See slides [here](#) for more details

There were four member updates on day 1:

- **Alessandro Iellamo from FHI360** shared an update on current work, including across northeast Nigeria, Yemen, Ethiopia and Ukraine, and the development of the first IYCF-E Assessment Guide.
- **Sajia Mehjabeen from Concern Worldwide** highlighted their focus on gender integration, piloting support group approaches, integrating the MAMI (Management of small and nutritionally at-risk infants under six months and their mothers) care pathway approach, among other activities.
- **Mija Ververs from Centers for Disease Control and Prevention/Johns Hopkins University** shared an update on their work on the IYCF-E Repository, advocacy and research on relevant IYCF-E topics resulting in peer-reviewed publications, and ongoing technical support for IYCF-E in the context of chemical, biological, radiological and nuclear threats and infectious diseases.
- **Sibida George from International Medical Corps (IMC)** shared an update on their response in emergencies in Gaza, Ukraine, Lebanon, Syria, Turkey, Somalia, etc. Among other activities, IMC has carried out IYCF assessments, implemented MAMI programmes, conducted maternal, infant and young child nutrition sensitisation sessions, and facilitated mother support groups.

## Wrap up and closing of the day

**Facilitator: Dima Ousta**

Dima closed the first day of the annual meeting by summarising the day's discussions, acknowledging that it was an information-heavy day. She thanked members for contributing to the rich discussion and the IFE-CG SC members for facilitating, as well as thanking ENN colleagues for their support on the technical aspects of the day's meeting.

## Day 2

### Welcome, registration and recap of day 1

**Facilitator:** Dima Ousta

See slides 172–175 in the slide pack [here](#)

At the start of day 2, Dima opened the meeting by welcoming participants. She acknowledged that, although day 1 was an information-heavy day, day 2 would be a day of more interactions and discussions. She oriented the participants on the Mural board and went through the different sections summarising some of the feedback received by members, and finally provided an overview of the agenda for day 2.

### Session 6: Review proposed 2025 IFE-CG workplan (part 2)

**Purpose:** *Present draft 2025 IFE-CG workplan for members to provide feedback on*

**Facilitators:** Nicki Connell (AM session) and Fatmata Sesay (PM session)

See slides 176–178 in the slide pack [here](#)

Nicki and Fatmata shared a brief recap of the feedback from discussions on day 1:

- Important to ensure we include space in the workplan to respond to emerging issues.
- Think about the role of technology (AI) and what it means for the IFE-CG.
- The IFE-CG needs to reach out to those who have not been connected to the IFE-CG, widening the scope of the IFE-CG's mandate.
- Consider developing a one-pager on why IYCF-E response is important in disasters.

Members were assigned to breakout rooms to work on two key questions, with the key feedback (from both the AM/PM sessions) being as follows:

#### 1) Is there anything in the suggested changes to the workplan that is not needed?

- Agree with proposition of what to drop and what to amend.
- Agree there is no need to focus on CFE specifically. If UNICEF is going to focus on CFE then there is no need for IFE-CG to also do this – we can just support. Do need to make it clear how we will engage with global CFE fora and who represents the IFE-CG. Request to include an activity that re-establishes the CFE WG with the purpose of active engagement and bi-directional information sharing with the Global Complementary Feeding Collective (GCFC) (or other relevant sub-thematic group).
- We need to be clear on what we want to do with maternal nutrition – if someone else is doing it and doing it well, can the IFE-CG step back and let them do it? If there are areas we are missing that we can add value to, this needs more discussion.

#### 2) Is there anything missing from the proposed workplan that members feel is critically needed?

1. Action plan about how to better reach countries, as the mechanism through the GNC is not sufficient. Membership restructuring may partially address this through potentially having a community of practice.
  - i. Need to increase engagement with individuals (not just organisations and different fields of practice).
  - ii. Include reaching at-risk countries (emergency preparedness).

- iii. Can we add IFE-CG in the GNC communications strategy? Make sure to capitalise on all organisations' relevant communication strategies.
  - iv. Can we have a more detailed plan by region, e.g. midwife engagement is a priority, but what can be done at regional level?
2. Rather than focusing on dissemination of individual outputs, ensure every time a resource is produced that communication is budgeted for. Also ensure that resources are translated before dissemination.
    - i. Make our materials accessible to non-technical audiences (partners in emergencies, those doing non-food items, food security, WASH, health) and sensitise these groups, continue to work in addition to OCHA, and continue to involve our own communications teams within our organisations.
    - ii. Activity C.1.1 (Global-level meeting – Participate in global-level meetings and expert groups (NetCode, GNC, Global Breastfeeding Collective, GCFC, World Health Organization (WHO)/UNICEF CF Implementation Guidance expert group and others as identified) is linked to the above – discuss what engagement with the relevant global groups should be and who represents IFE-CG given the particular staffing constraints next year.
    - iii. UNICEF should have a stronger role in dissemination of products.
  3. In regard to D.1.7 (Strengthen SC through actioning the recommendations from the August 2024 MTR face-to-face meeting), we need to pull out specific actions more concretely and prioritise actions.
  4. Conducting research is not a priority for the IFE-CG, but there is consensus on the need to bring to finalisation the Kenya Addison work as it is budgeted for, thus explaining the establishment of a research TF in 2025.
  5. Concern about whether the workshop/session on AI should be prioritised in 2025. Is it a “stepping stone” to more activity that is too much? The group was also concerned about confidentiality/data protection related to use of AI.
  6. The group felt the activity B.1.3 (Develop new guidance or update existing guidance based on emerging urgent needs identified in an active emergency) provides the space to have flexibility on responding to escalated requests.
  7. Question around whether there is enough space in the workplan to cover emerging issues, i.e. guidance on gender, climate change and anticipatory action relevant to IFE.
  8. Are we missing any activities that may be requested by the GNC of GTWGs in 2025? Can the GNC flag any anticipatory “asks” they are aware of?

The documents with complete group notes from each breakout group can be found in [Appendix 3](#).

## Update on the IYCF-E Hub

**Purpose:** *Updates on the IYCF-E Hub to be shared with IFE-CG members*

**Presenter:** Joanne Chui

See slides 179 in the slide pack [here](#)

Joanne highlighted some of the changes made to the IYCF-E Hub in the past year, including:

- Improved search function
- Improved mobile browsing experience
- Strengthened design and user interface
- Maximised use of data analytics

## Session 7: CFE

**Purpose:** *Information sharing from UNICEF on CFE, discussion on members' planned contributions in the CFE subsector and role the IFE-CG can play in CFE.*

**Facilitator:** Linda Shaker

See slides 181–207 in the slide pack [here](#)

An update was provided on the aims, objectives and ways of working within the GCFC. The GCFC liaises with and has influence through several groups, including the IFE-CG. Some of the upcoming plans for the GCFC include:

- 12 November 2024 – Global launch of the GCFC with a social media toolkit that will be shared as well.
- Key advocacy asks (advocacy brief) to be launched in November 2024.
- A scorecard and complementary feeding advocacy toolkit are underway for the GCFC to support efforts in CFE.

Linda also outlined the inclusion of a chapter on CFE in the WHO/UNICEF complementary feeding implementation guidance, due to be completed by the end of the first quarter of 2025. The ENN IFE Project Lead is representing the IFE-CG in the development of that chapter. In addition, UNICEF are developing their own internal standard operating procedure on CFE, which aims to support the integration of CFE into service packages, assessments, monitoring, preparedness planning, etc., which will be shared externally once finalised. This is among several other initiatives UNICEF is supporting on CFE, e.g. the First Foods Africa initiative.

Members shared some key reflections, especially highlighting the mutually beneficial relationship between the GCFC and the IFE-CG, e.g. in conversations around advocacy and communications around complementary feeding, sometimes the fact that a child is breastfeeding alongside complementary feeding can be presented as a vulnerability rather than an action that is protective. Members highlighted that maybe there is an opportunity for the IFE-CG to support with communications around this and clarify the importance of breastfeeding and breastfeeding alongside complementary feeding. One member suggested that it would be important to re-emphasise this, perhaps with an accompanying document or paper written on this specific topic of continued breastfeeding; this is one of the ways the IFE-CG could work together with the GCFC. Members asked how GCFC members were selected and how they can apply to join. Members wanted to ensure CFE is included in the

standard/template of the joint statement (which it is). Lastly, members were appreciative of UNICEF's support in driving forward global efforts for CFE.

## Session 8: IFE-CG communications strategy and workplan

**Purpose:** *Provide an update on the IFE-CG communications strategy and workplan and get direction from members on the most important priorities for 2025.*

**Facilitators:** Brooke Bauer (AM) and Jodine Chase (PM), presentation – Dima Ousta

See slides 210–218 in the slide pack [here](#)

The presenter provided an overview of the IFE-CG communications strategy and workplan, including the background to the workplan and how it has been organised, and provided more detail on the suggested 12 prioritised activities for consideration for action in 2025. Members then voted for and prioritised their top three activities from this list of 12 (outlined in the slides). The activities with the highest number of votes were as follows:

- B1 (Develop a one-page briefier/process for best practice dissemination for members to use when developing an IFE-CG output (target audience: IFE-CG members); For new resources: develop slides for sharing content on new resources (broader target audience); Prepare email text for sharing, blurb for newsletter; suggested social media posts and share these with the GNC at least for dissemination (broader target audience))
- B2 (Toolkit for operationalising OG-IFE; packaged in a way that is context specific: infographics, infographics repurposed into social media graphics, OG-IFE in animated micro-learning videos (3–5 min instructional/educational – from field workers and mothers) in various languages)
- B8 (Develop a 'media pack/how to speak about IYCF-E' (as expressed in wishlist) building off of media engagement work conducted by the IFE-CG so far, e.g. messages for press releases/press briefs, social media cards)

Members shared that toolkits require a great amount of effort. If the OG-IFE is soon to be updated, then we should consider the amount of effort and commitment it would take to create a toolkit before embarking on this. We could also consider creating a toolkit that can be adapted (e.g. based on the context).

## Member updates: Day 2

**Purpose:** *Opportunity for IFE-CG members to share updates throughout the meeting*

See slides [here](#) for more details

There were five member updates on day 2 as follows:

- **Karleen Gribble (independent)** shared some of her papers that have been published in the past 12 months, many of which were a collaborative effort between IFE-CG members. She also highlighted some resources developed with the Australian Breastfeeding Association (e.g. bushfire project resources and a mother–baby area guide for Australia).
- **Hiroko Hongo (independent)** shared her publications, including correspondence with *The Lancet* and translation/dissemination of the IFE-CG's 'media guide' into Japanese, among other works.

- **Colleen Emary from World Vision International** shared what they have been working on over the last year around IYCF-E technical resources and programming guidance (including complementary feeding), World Breastfeeding Week, policy and advocacy, and programming.
- **Patti Rundall from International Baby Food Action Network (IBFAN)** shared some of their work including regular statements at the WHO and World Health Assembly fora and other meetings, webinars on the current situation in Gaza, the urgent need for breastfeeding and relactation support, and attendance at Codex meetings where global trading standards are set. Patti also flagged that in October 2024 the following article by Maryse Arendt (IFE-CG member and part of the IBFAN network) was published in *Breastfeeding Medicine*: [Achievements and challenges in breastfeeding during two years of war in Ukraine](#).
- **Jodine Chase from SafelyFed Canada** shared their work including on disseminating the film 'Milk', developing resources on rapid infant feeding triage, training on the International Code of Marketing of Breastmilk Substitutes incorporating IYCF-E and donations, supporting the research paper on the Code/OG-IFE violations in the Turkey earthquake, active participation in Health Canada pre-consultation on formula regulations with a focus on IYCF-E, and continued social media content development to disseminate resources.

## Wrap up and closing of the day

**Facilitator: Dima Ousta**

Dima gave a brief overview of the day's events, starting with a recap of the previous day's discussions and then the group work and discussions on the review of the 2025 workplan, including the communications plan.



## Day 3

### Welcome, registration and recap of Day 2

**Facilitator:** Dima Ousta

See slides 221–222 in the slide pack [here](#)

Dima welcomed members to the last day of the annual meeting and recapped day 2's discussions.

### Session 9: Maternal nutrition

**Purpose:** *Present preliminary work done on maternal nutrition and solicit feedback on what, if at all, the ICE-CG's role should be in working on maternal nutrition moving forward*

**Facilitators:** Jiayi Guan and Mija Ververs

See slides 223–241 in the slide pack [here](#)

In the MTR follow-up face-to-face meeting in August 2024 the conversation around maternal nutrition and where this sits within the IFE-CG's role came up as an ad hoc discussion. Mija offered student/volunteer capacity to map what is being done on maternal nutrition.

In this session, Jiayi presented the scope of work she was set to work on around maternal nutrition. Definitions were mapped from 29 documents from 28 organisations. Jiayi shared the main findings and conclusions that maternal nutrition is widely recognised as a component of maternal and child health (especially related to birth outcomes and breastfeeding). Mija and Jiayi requested that IFE-CG members share relevant documents with them to analyse as part of Jiayi's work.

A Mentimeter poll was then launched where members voted on five questions:

1. Which definition of maternal nutrition do you prefer?
2. Should the OG-IFE in a next update provide more details on maternal nutrition?
3. If we work on maternal nutrition in the IFE-CG, should that only refer to breastfeeding women or also non-breastfeeding women?
4. Should the IFE-CG work on women's/adolescent girls' nutrition in general (even when they are not pregnant or breastfeeding)?
5. Do you think other organisations are better positioned to work on maternal nutrition than the IFE-CG? If so, please suggest their names.

The AM group favoured the maternal nutrition definition that states 'Women/girls of reproductive age from beginning of pregnancy to a child's second birthday (first 1,000 days) regardless of their choice to breastfeed, mix feed or not breastfeed'. On the other hand, the PM group preferred the definition 'Pregnant and lactating women and girls plus preconception period (this means all women and girls of reproductive age)'. Both groups agreed that the next OG-IFE should provide more detailed information on maternal nutrition. Most members concurred that if the IFE-CG addresses maternal nutrition, it should include both breastfeeding and non-breastfeeding women. Furthermore, most members from both groups supported the IFE-CG focusing on the nutrition of women and adolescent girls more broadly, even outside of pregnancy and breastfeeding. Suggestions were made for organisations better positioned to address maternal nutrition, such as the United Nations

Population Fund (UNFPA), UNICEF, the MAMI Global Network, WHO, and the Women's Nutrition in Humanitarian Contexts TF under the GNC. The full responses from both groups can be accessed here: [Session 9 Maternal Nutrition Poll AM Session](#) and [Session 9 Maternal Nutrition Poll PM Session](#).

The same questions were asked in the group sessions with the summary of the discussion as follows. During the AM session, group 1 favoured a holistic definition of maternal nutrition that includes women and adolescent girls from preconception to a child's second birthday, regardless of breastfeeding choices. This approach emphasises the importance of addressing maternal nutrition before, during and after pregnancy. Group 2 highlighted the need for maternal nutrition to encompass both breastfeeding and non-breastfeeding women within the IFE Core Group framework. While recognising the importance of the preconception period, they noted potential bandwidth limitations in addressing this phase. They also advocated for updating the OG-IFE to include specific interventions for pregnant and breastfeeding women in emergency contexts. Group 3 deliberated on whether the IFE-CG should address the nutrition of women and adolescent girls beyond pregnancy and breastfeeding, acknowledging the critical role of preconception nutrition in infant health. They emphasised the need for collaboration with organisations like UNFPA and the Global Adolescent Nutrition Network and suggested balancing the IFE-CG's principles with donor priorities.

During the PM session, group 1 reiterated the importance of addressing maternal nutrition from the preconception phase to a child's second birthday, while also recognising the challenges of resource and capacity constraints. They noted the necessity of preparing for breastfeeding during the preconception period. Group 2 supported including both breastfeeding and non-breastfeeding women in maternal nutrition initiatives, emphasising maternal nutrition's role in supporting caregiving and complementary feeding. Group 3 advocated for expanding maternal nutrition detail in the OG-IFE by providing essential, actionable guidance. They stressed the importance of promoting locally sourced, nutritious foods over therapeutic products and incorporating behavioural counselling to support mothers and infants. Group 4 underscored the importance of maternal nutrition for both adolescent girls and adult women throughout emergencies. They suggested a clearer definition of the IFE-CG's role, particularly regarding preconception nutrition. Lastly, group 5 recommended collaboration with health-focused organisations, such as UNICEF, UNFPA, World Food Programme (WFP) and Action Against Hunger (ACF), to leverage their expertise in maternal nutrition activities.

The conclusion from this session was that Jiayi will continue her analysis of the maternal nutrition subsector and in 2025 will present her findings to the SC, who will prepare an update for the IFE-CG collective on what the IFE-CG's role should/could be regarding maternal nutrition.

The documents with complete group notes from each breakout group can be found in [Appendix 3](#).

## Session 10: Focus on 2025 – key priorities/recommendations

**Purpose:** *Summarise discussions and directions from days 1 and 2 and discuss WGs/TFs to be maintained, dissolved and created to take the 2025 workplan forward.*

**Facilitators:** Karleen Gribble (AM) and Brigitte Tonon (PM)

See slides 244–254 in the slide pack [here](#)

Karleen and Brigitte shared a summary of the discussions and directions from days 1 and 2 of the IFE-CG annual meeting, including feedback regarding the MTR process and draft statements, as well as some of the common themes arising. In addition, a few of the key questions from members and emerging issues/themes to consider going forward into 2025 were highlighted (e.g. allowing space in the IFE-CG 2025 workplan for escalated requests, strengthening our communication and dissemination efforts, expanding our reach to others, considering technology and innovation, etc.). Nicki Connell then provided clarification on the 2025 IFE-CG workplan activity around taking forward Kenya Addison’s IYCF-E research agenda by establishing a research TF in 2025 (i.e. while research is not a core focus for the IFE-CG, this activity is just to bring Kenya’s work to conclusion since it is already funded). Alessandro Iellamo highlighted that the webinar WG has reached “maturity” and will be looking to diversify its membership and agency representation in 2025 so that there can be more expertise and experience around the table. Patti Rundall shared that on the MAMI Global Network webpages breastfeeding is not clearly mentioned until the kangaroo mother care section.

## Session 11: SC focus and plans for 2025, including development of next strategy and review of outstanding/unaddressed parking lot questions

**Purpose:** *SC to share plans for 2025, development of next strategy and acknowledge and address or consider a plan where possible for member feedback, suggestions and questions that came through the “Reflections & Parking Lot board”*

**Facilitator:** Alessandro Iellamo

See slides 257–264 in the slide pack [here](#)

Alessandro presented the SC priorities for 2025:

- Prioritise actions recommended by the MTR and agreed on during the MTR follow-up face-to-face meeting (i.e. finalise IFE-CG mission/vision and other statements, membership structure, IFE-CG terms of reference as a GTWG of the GNC, etc.).
- Discuss the development of the new IFE-CG strategy (2026–2031).
- Finalise proposition to the membership for SC renewal of terms in 2025. Maintain continuity within the current SC for one more year to work on priority issues from the MTR and ensure continuity of work in the absence of the current IFE-CG Coordinator and ENN IFE Project Lead and agree on interim measures to support maternity covers for both these positions.

Alessandro suggested that the SC should stay as it is considering capacity gaps in 2025 with the current IFE-CG Coordinator and ENN IFE Project Lead being away on maternity leave, and the IFE-CG members agreed with this suggestion.

Alessandro then reviewed comments/questions from the parking lot and the Mural board. Two comments were received:

- Consider taking a more strength-based approach rather than a deficits approach (women having capacities rather than focusing on the challenges women face).
- Suggestion to have an evaluation of the provision of infant formula as a first resort by UNICEF now that the system has been in place for several years. An assessment is needed to gain an understanding of how this is working, identify any gaps/problems and identify where adjustments could be made to improve the system or whether things are working well.

Both comments were well received by the membership, with substantial discussion on the second point. Save the Children International (SCI) added they will be doing a deep dive on breastmilk substitutes (BMS) in 2025, including a review of the BMS calculator. They welcomed working within a collective as it is part of a much larger conversation. Members asked if SCI could approach UNICEF as they (UNICEF) are now the provider of first resort for provision of BMS in emergencies. The process for how this deep dive will be done has not yet been decided but this will be considered when they begin this work next year.

### Member updates: Day 3

***Purpose: Opportunity for IFE-CG members to share updates throughout the meeting***

See slides [here](#) for details

There were several member updates on day 3 as follows:

- **Terry Theuri from UNHCR** shared their ongoing efforts:
  - The emergency handbook has been updated to include IYCF-E.
  - Updated UNHCR public health and nutrition admin instructions to include BMS/Code provisions.
  - Research conducted on IYCF practices in refugee settings across 203 population-based surveys from 2013 to 2019. Findings include the multisectoral IYCF framework -out: 50% (48 operations); skilled IYCF support at health facility level: 85%; IYCF support at community level: 58%; average exclusive breastfeeding rate among refugee populations: 65% (18 countries, 115 sites); early initiation of breastfeeding: 70%; introduction to complementary feeding: 56%.
- **Brooke Bauer from SCI** shared their IYCF-E work, including guidance and tools developed and information around capacity strengthening. SCI are currently mapping their operational footprint. SCI is the lead agency for IYCF-E within the GNC operations team.
- **Lisa Littrell from Helen Keller International** shared their community-based management of acute malnutrition work in the Asia region (Philippines, Bangladesh and Nepal) and Africa (Niger, Senegal, Nigeria, Mali, Kenya and Democratic Republic of the Congo).
- **Brigitte Tonon from ACF** presented their IYCF-E work across different missions through integrated health centre and community-level interventions; integration into food security and livelihood interventions; integration of IYCF into income-generating activities and through training the food security and livelihoods team; and MAMI pilots in Pakistan and Uganda.

- **Alessandro Iellamo from FHI360** shared an update (similar to day 1 during the PM session) on current work across northeast Nigeria, Yemen, Ethiopia and Ukraine, the development of the first IYCF-E Assessment Guide, their work on AI deployment to increase access to IYCF-E support globally, regionally and nationally, and presentations at various IYCF-E global events (in person and online, e.g. World Public Health Nutrition Congress, June 2024, London).
- **Helen Gray from the Baby Feeding Law Group UK** provided an update on their IYCF-E education and training in the UK and Europe, along with some resources on the Code for health workers and around partnerships and conflicts of interest that some may find useful.
- **Eilise Brennan from GOAL** shared the following updates from GOAL and the work that has been a priority in the past year:
  - Focused on updating their policy on maternal, infant and young child feeding in emergencies (MIYCF-E) and use of BMS, including orientating their country teams on the updated policy.
  - Started to look at supporting implementation of MAMI in South Sudan.
  - Various MIYCF-E activities across country programmes, including currently conducting rapid MIYCF-E assessments in Sudan.

## Wrap up, evaluation and closing of the meeting

### Facilitator: Dima Ousta

Dima asked all members to take a few minutes to complete the evaluation form. She expressed gratitude to the participants for their contributions during the three-day meeting and to the session facilitators for their excellent work. Appreciation was also extended to the SC for their efforts in preparing, guiding and facilitating the meeting, the ENN team for making the event a success, and the donors whose generous support made the meeting possible. The IFE-CG members were acknowledged for their active support over the three days and their suggestions on the way forward.

## Appendices

### Appendix 1: Meeting agenda

AM Session 9.30am - 12.30pm (UK Time)	PM Session 2pm - 5pm (UK Time)	Day 1 – 22 <sup>nd</sup> October 2024	Duration	Facilitator(s) – AM session	Facilitator(s) – PM session
9.30am	2pm	Welcome, registration & overview of meeting objectives & agenda	15min	Dima	Dima
9.45am	2.15pm	<b>Session 1:</b> 25 years of IFE Core Group.	15min	Karleen	Karleen
10.00am	2.30pm	<b>Session 2:</b> Outcomes of the Mid-Term Review Follow-Up Face-to-Face meeting	30min	Caroline/Alex	Caroline/Fatmata
10.30am	3.00pm	IFE Core Group member update	5min	TBD	TBD
10.35am	3.05pm	Break + group photo	15min		
10.50am	3.20pm	<b>Session 3:</b> Presenting progress against 2024 workplan	40min	Dima	Dima
11.30am	4.00pm	<b>Session 4:</b> Presentations from Working Groups & Task Forces on way forward for 2025 (WWG, IWG, Glossary TF, Infectious Diseases TF).	20min (5min per group)	Alex, Raye, Caroline, Cecile	Alex, Raye, Caroline, Cecile
11.50am	4.20pm	IFE Core Group member update	5min	TBD	TBD
11.55am	4.25pm	<b>Session 5: Review proposed 2025 workplan (part 1)</b> Presentation	30min	Karleen	Sarah
12.25pm	4.55pm	Wrap up and closing of day	5min	Dima	Dima
AM Session 9.30am - 12.30pm (UK Time)	PM Session 2pm - 5pm (UK Time)	Day 2 – 23 <sup>rd</sup> October 2024	Duration	Facilitator(s) – AM session	Facilitator(s) – PM session
9.30am	2pm	Welcome, registration & recap of Day 1	10min	Dima	Dima
9.40am	2.10pm	<b>Session 6: Review proposed 2025 workplan (part 2)</b>	45min	Nicki	Fatmata
10.25am	2.55pm	<b>Short update on the IYCF-E Hub</b>	5min	Joanne Chui	Joanne Chui
10.30am	3.00pm	IFE Core Group member update	5min	TBD	TBD
10.35am	3.05pm	<b>Session 7:</b> Complementary Feeding in Emergencies (CFE)	45min	Linda and Najwa	Linda and Najwa
11.20am	3.50pm	Break	15min		
11.35am	4.05pm	IFE Core Group member update	10min	TBD	TBD
11.45am	4.15pm	<b>Session 8:</b> Communications Strategy and Workplan: Present draft Communications Strategy and Workplan	40min	Brooke Presentation: Dima	Jodine Presentation: Dima
12.25pm	4.55pm	Wrap up and closing of day	5min	Dima	Dima
AM Session 9.30am - 12.30pm (UK Time)	PM Session 2pm - 5pm (UK Time)	Day 3 – 24 <sup>th</sup> October 2024	Duration	Facilitator(s) – AM session	Facilitator(s) – PM session
9.30am	2pm	Welcome, registration & recap of Day 2	10min	Dima	Dima
9.40am	2.10pm	<b>Session 9:</b> Maternal Nutrition	60min	Jiayi Guan & Mija/Nicki	Jiayi Guan & Mija
10.40am	3.10pm	IFE Core Group member update	10min	TBD	TBD
10.50am	3.20pm	<b>Session 10:</b> Focus on 2025 – Key priorities and recommendations	30min	Karleen	Brigitte
11.20am	3.50pm	Break	15min		
11.35am	4.05pm	IFE Core Group member update	10min	TBD	TBD
11.45am	4.15pm	<b>Session 11:</b> Steering Committee focus & plans for 2025	30min	Alex	Alex
12.15pm	4.45pm	Wrap up, evaluation and closing of meeting	15min	Dima	Dima

## Appendix 2: Meeting attendees

Role, Organisation	Name	Day 1	Day 2	Day 3
ACF France	Adelaide Challier	PM	PM	PM
ACF France	Brigitte Tonon	-	-	PM
ACF UK	Alexandra Rutishauser-Perera	AM	AM	-
ACF US	Adugna Yimam	PM	PM	PM
Baby Feeding Law Group UK	Helen Gray	PM	AM	PM
Centers for Disease Control and Prevention and Johns Hopkins University	Mija Ververs	PM	PM	AM, PM
CHEERing	Mariah Banks	PM	-	-
Concern Worldwide	Sajia Mehjabeen	AM	AM	AM
ENN	Anne Gitari	AM, PM	AM, PM	AM, PM
ENN	Caroline Abla	AM, PM	AM	AM
ENN	Holly Ruffhead	AM, PM	AM, PM	AM, PM
ENN	Nicki Connell	AM, PM	AM, PM	AM, PM
ENN	Raye Menezes	AM, PM	AM, PM	AM, PM
ENN (IFE-CG Coordinator)	Dima Ousta	AM, PM	AM, PM	AM, PM
FHI360	Alessandro Iellamo	AM, PM	AM, PM	AM, PM
GNC Nutrition in Emergencies Helpdesk	Cecile Basquin	AM, PM	PM	PM
GOAL	Eilise Brennan	AM	PM	PM
GOAL Global	Hatty Barthorp	-	AM	-
Helen Keller International	Jennifer Burns	-	PM	-
Helen Keller International	Lisa Littrell	AM	AM	AM
IBFAN Global	Patti Rundall	PM	PM	AM, PM
IBFAN South Asia	Prof. S K Roy	PM	PM	PM
Independent member	Bindi Borg	AM, PM	PM	PM
Independent member	Deborah Joy Wilson	AM	AM	AM
Independent member	Hiroko Hongo	-	AM	AM
Independent member	Karleen Gribble	AM, PM	AM	AM
Independent member	Magdalena Whoolery	PM	-	PM
IMC	Sibida George	PM	PM	PM
International Rescue Committee	Assumpta Ndumi	AM	AM	-
IYCF-E Hub	Joanne Chui*	-	AM, PM	-

Johns Hopkins Bloomberg School of Public Health, International Health graduate	Jiayi Guan*	-	-	AM, PM
Safely Fed Canada	Jodine Chase	PM	PM	PM
Samaritan's Purse	Julie Tanaka	PM	PM	PM
Samaritan's Purse	Kelly Hormez	PM	-	-
SCI	Sarah O'Flynn	AM	PM	PM
SCI	Brooke Bauer	AM	AM	AM
UNHCR	Terry Theuri	PM	AM	AM
UNICEF	Fatmata Fatima Sesay	PM	PM	-
UNICEF	Linda Shaker	-	AM, PM	-
UNICEF	Najwa Al Dheeb	AM	PM	-
USAID/Bureau for Humanitarian Assistance	Eric Anderson	PM	PM	PM
USAID/Bureau for Humanitarian Assistance	Judy Canahuati	PM	PM	PM
WFP	Angela Kangori	PM	PM	PM
World Vision International	Colleen Emary	PM	PM	PM

*\*Invited presenters*

*Note that this list of participants is not comprehensive as it only reflects the names of participants who provided consent to have their name and their organisation's name reflected in this report.*



## Appendix 3: Presentations and meeting materials

**IFE-CG annual meeting agenda** – [Agenda - IFE-CG annual meeting](#)

**Presentation slides** – [IFE-CG 2024 annual meeting presentation slides](#)

**Member updates** – [IFE-CG member updates 2024](#)

**Presentations from working groups, task forces and the IYCF-E hub** – [IFE-CG WG, TF and IYCF-E Hub updates 2024](#)

**Session 6 – Review of 2025 workplan** – [Session 6 - Group notes](#)

**Session 9 – Maternal nutrition**

[Session 9 Maternal Nutrition Poll AM session](#)

[Session 9 Maternal Nutrition Poll PM session](#)

[Session 9 \(Maternal nutrition\) group notes](#)

## **Emergency Nutrition Network**

**2<sup>nd</sup> Floor, Marlborough House, 69 High Street,  
Kidlington, Oxfordshire, OX5 2DN, UK**

**Tel: +44 (0) 1865 372340**

[office@enonline.net](mailto:office@enonline.net)

[www.enonline.net](http://www.enonline.net)

