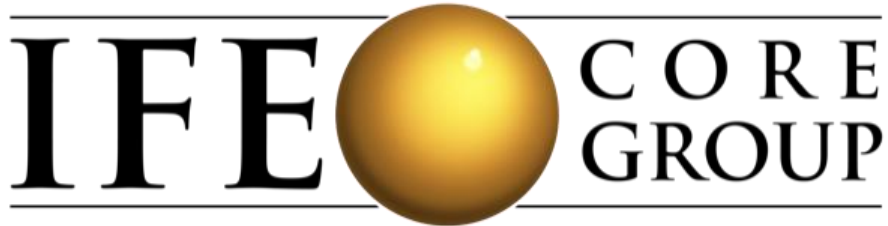


# Annual meeting 2022

October 24-25 & 27 2022



# Annual meeting 2022

Day 1 - October 24

Welcome!



Individual members: Caroline Abbla, Brooke Bauer, Bindi Borg, Karleen Gribble, Hiroko Hongo, Isabelle Modigell, Lourdes Santaballa, Victoria Sibson, Mija Tesse-Ververs.



Support of: **Irish Aid**  
Rialtas na hÉireann  
Government of Ireland

Part of: **GLOBAL NUTRITION CLUSTER**  
Technical Alliance

# Meeting objectives

- ❖ Review IFE Core Group progress for 2022
- ❖ Identify priority areas and actions for a work plan to be delivered by the collective for 2023

**TIMING – 3 DAYS, 3 HOURS EACH DAY – CHOSE \*ONE EACH DAY**

<b>UK time</b>	<b>Day 1 Mon Oct 24</b>	<b>Day 2 Tues Oct 25</b>	<b>Day (Off) Wed Oct 26</b>	<b>Final Day Thurs Oct 27</b>
<b>10 AM – 1 PM</b>	<b>AM SESSION</b>	<b>AM SESSION</b>		<b>AM SESSION</b>
<b>1 PM – 2 PM</b>				
<b>2 PM – 5 PM</b>	<b>PM SESSION*</b>	<b>PM SESSION*</b>		<b>PM SESSION*</b>

*\*Same agenda as AM session*

## DETAILED AGENDA DAY 1

MON OCT 24      10 AM – 1 PM UK TIME      2 PM – 5 PM UK TIME

10am   2 pm	<b>Welcome, Registration &amp; overview of meeting objectives &amp; agenda</b>	(10 min)
10:10   2:10	<b>ENN Welcome</b>	(10 min)
10:20   2:20	<b>IYCF-E Ten Years of Progress Report Overview</b>	(20 min)
10:40   2:40	<b>Update on Annual Work Plan</b>	(50 min)
11:30   3:30	<b><i>Break</i></b>	(15 Min)
11:45   3:45	<b>Gaps, Challenges, Enablers and Priorities In IYCF-E</b>	(50 min)
12:35   4:35	<b>IFE Core Group Member Updates</b>	(10 Min)
12:45   4:45	<b>Wrap Up and Closing of the Day</b>	(15 Min)
1:00   5:00	<b>END</b>	

## DETAILED AGENDA DAY 2

TUES OCT 25

10 AM – 1 PM UK TIME

2 PM – 5 PM UK TIME

10am   2 pm	<b>Welcome, Registration and Recap of Day</b>	(10 min)
10:10   2:10	<b>IFE Core Group Member Updates</b>	(10 min)
10:20   2:20	<b>IFE Core Group Outputs division to breakout rooms</b>	(15 min)
10:35   2:35	<b>Breakout Rooms – 2023 Planning</b> <i>(includes 10 min break)</i>	(105min)
12:20   4:20	<b>IFE Core Group Member Updates</b>	(10 min)
12:30   4:30	<b>Plenary Discussion: priorities and activities</b> <b>Wrap up and closing of the day</b>	(30 min)
1:00   5:00	<b>END</b>	

## DETAILED AGENDA DAY 3

THURS OCT 27      10 AM – 1 PM UK TIME      2 PM – 5 PM UK TIME

10am   2 pm	<b>Welcome, Registration and Recap of Day 2</b>	(10 min)
10:10   2:10	<b>IFE Core Group Member Updates</b>	(10 min)
10:20   2:20	<b>Working Group Presentations (15 min ea)</b>	(60 min)
11:20   3:20	<b><i>Break</i></b>	(10 min)
11:30   3:30	<b>Plenary Discussion: Our Ways of Working</b>	(60 min)
12:30   4:30	<b>Plenary Discussion: priorities and activities</b>	
	<b>Wrap up and closing of the day</b>	(30 min)
1:00   5:00	<b>END</b>	



Please open this link, make sure you are able to access Jamboard and keep it on hand for the rest of the day:

[https://www.enonline.net/attachments/4904/IFE-Core-Group-Annual-Meeting-2022\\_Jamboard.pdf](https://www.enonline.net/attachments/4904/IFE-Core-Group-Annual-Meeting-2022_Jamboard.pdf)

Welcome from ENN


# This or That

An orange speech bubble with a black outline and a tail pointing towards the bottom right.

Dogs

A purple thought bubble with a black outline and three smaller circles leading to the bottom left.

No Cats!



# Infant and Young Child Feeding: 10 Years of Progress



# Infant and Young Child Feeding in Emergencies

Operational  
Guidance for  
Emergency Relief  
Staff and  
Programme  
Managers

Developed by the IFE  
Core Group

Version 3.0 – October 2017

## Why?

In 2010 the World Health Assembly **urged member states to:**

“... ensure that national and international preparedness plans and emergency responses

**follow the evidence-based IYCF-E operations guidance ...”**

## First ever report – Aims

**Review progress** in fulfilling their IYCF-E commitments at the WHA

**Highlight the experience** of Member States and the humanitarian and development community in this journey

**Galvanize** Member States and the humanitarian and development community to **deliver on their global IYCF-E commitment**

## Infant and Young Child Feeding in Emergencies: TEN YEARS OF PROGRESS



July 2022

# The data

- Based on a mapping of all OG IFE actions and data sources
- **UNICEF NutriDash:** Additional years and analysis
- **Humanitarian Response Plans:** Additional years and analysis guide
- **World Breastfeeding Trends Initiative (WBTi):** Additional thematic analysis
- **Case studies:** Field Exchange and peer-reviewed literature
- **Observations**
  - Majority for action 1 and less for other actions
  - Global data sources identified for this report cover only 65% of the 194 Member States of the World Health Assembly
  - Few case studies and peer-reviewed literature were found from Latin America, the Caribbean, East Asia, and the Pacific

# Gaps

Gaps exist **despite the evidence that these behaviors and services supporting them are life-saving.**

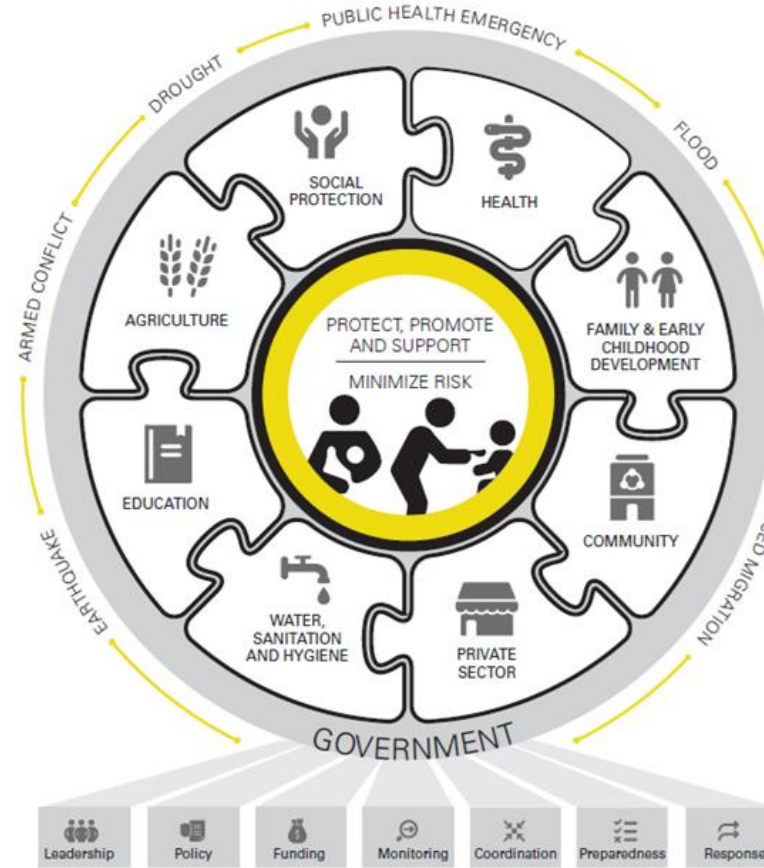
- Current **global data is inadequate**
- There is **no formal mechanism** for Member States to **measure their progress**, and **no requirement** to do so.
- There is currently **no consensus around methodologies** for analyzing data in global databases to distinguish between IYCF-relevant data in emergency versus non-emergency contexts.



# Recommendations

Governments **must take the lead.**

Six recommendations are offered for **Member States**, supported by six recommendations to the humanitarian and development community.



# Recommendations for governments

1. Fulfill their commitments under WHA Resolution 62.23
2. Strengthen emergency response by addressing governance and capacity gaps between nutrition and disaster management structures and between cluster and sectoral coordination platforms.
3. Invest in raising awareness, training, and institutionalizing IYCF-E capacity
4. Promote and fund IYCF-E interventions described in the OG-IFE
5. Close data gaps by investing in routine data systems and capacity for data-driven action
6. Continue to invest in the implementation of the *International Code of Marketing of Breastmilk Substitutes* and subsequent WHA Resolutions (referred to hereafter as “the Code”), including monitoring Code violations, and adopt legislation to prevent BMS donations in emergencies.

# Recommendations for humanitarian and development communities

1. Develop and deliver policy advocacy agenda to promote the uptake of actions outlined in the OG-IFE.
2. Define individual agency commitments to IYCF-E and ensure that respective agency policies, processes, competencies, capacity development and resources reflect these commitments.
3. Revise humanitarian and development guidance documents and define inter-cluster commitments to support multi-sectoral collaboration for IYCF-E.
4. Support the sharing of research and lessons learned to improve IYCF-E programming.
5. Support the development of robust country-level nutrition information systems and capacities.
6. Develop a complementary monitoring framework to support tracking progress at the county level in delivering on actions outlined in the OG-IFE.

# Additions

- **Infographic** illustrating OG-IFE
- **Timeline:** to illustrate that the foundation for IFE has been in place across normative, legal and operational frameworks. Focus on those that apply across Member States and agencies.
- **Updated case study and literature search:** experiences and gaps
- **Updated infographic** recommended practices and measurable indicators for feeding infants and young children (0-23 months), aligned with new UNICEF/WHO IYCF indicators

# OG-IFE in practice

- Broad range of emergencies
- Foundation of government as duty bearers
- Importance of multisectoral work
- Additional support of the OG-IFE to support caregivers and young children

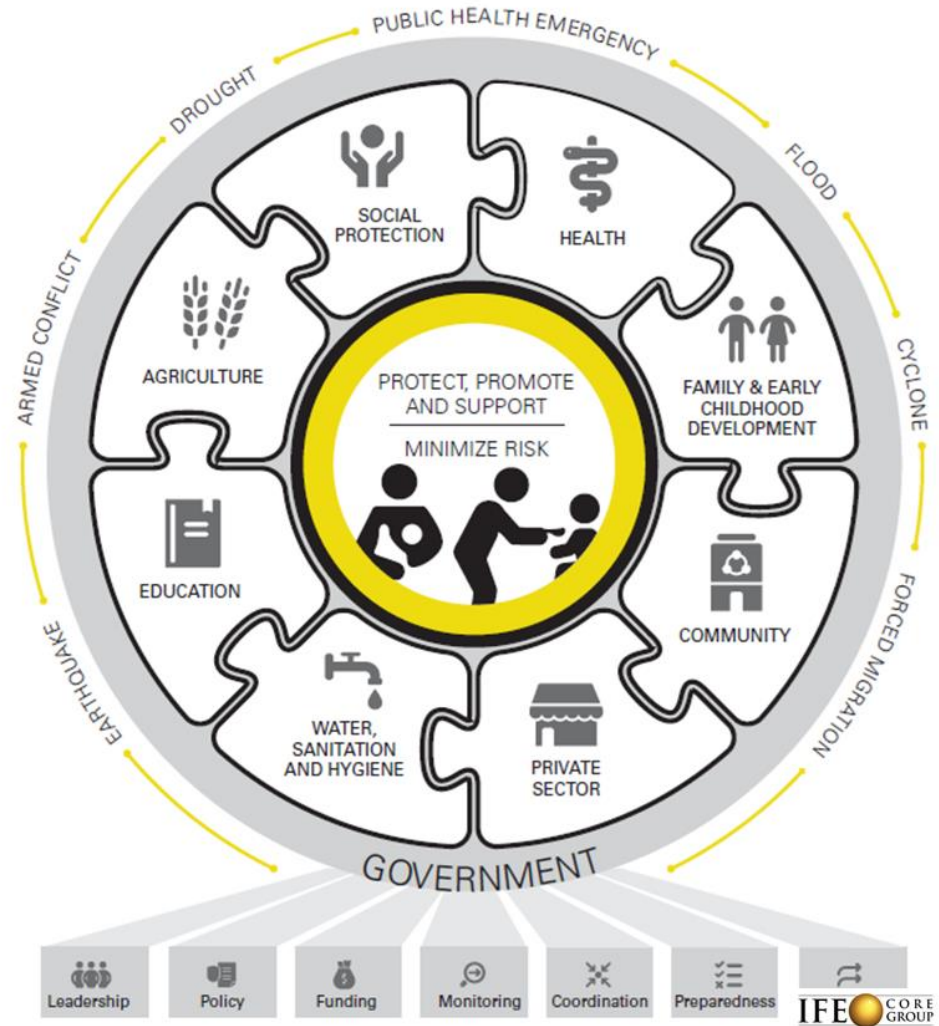
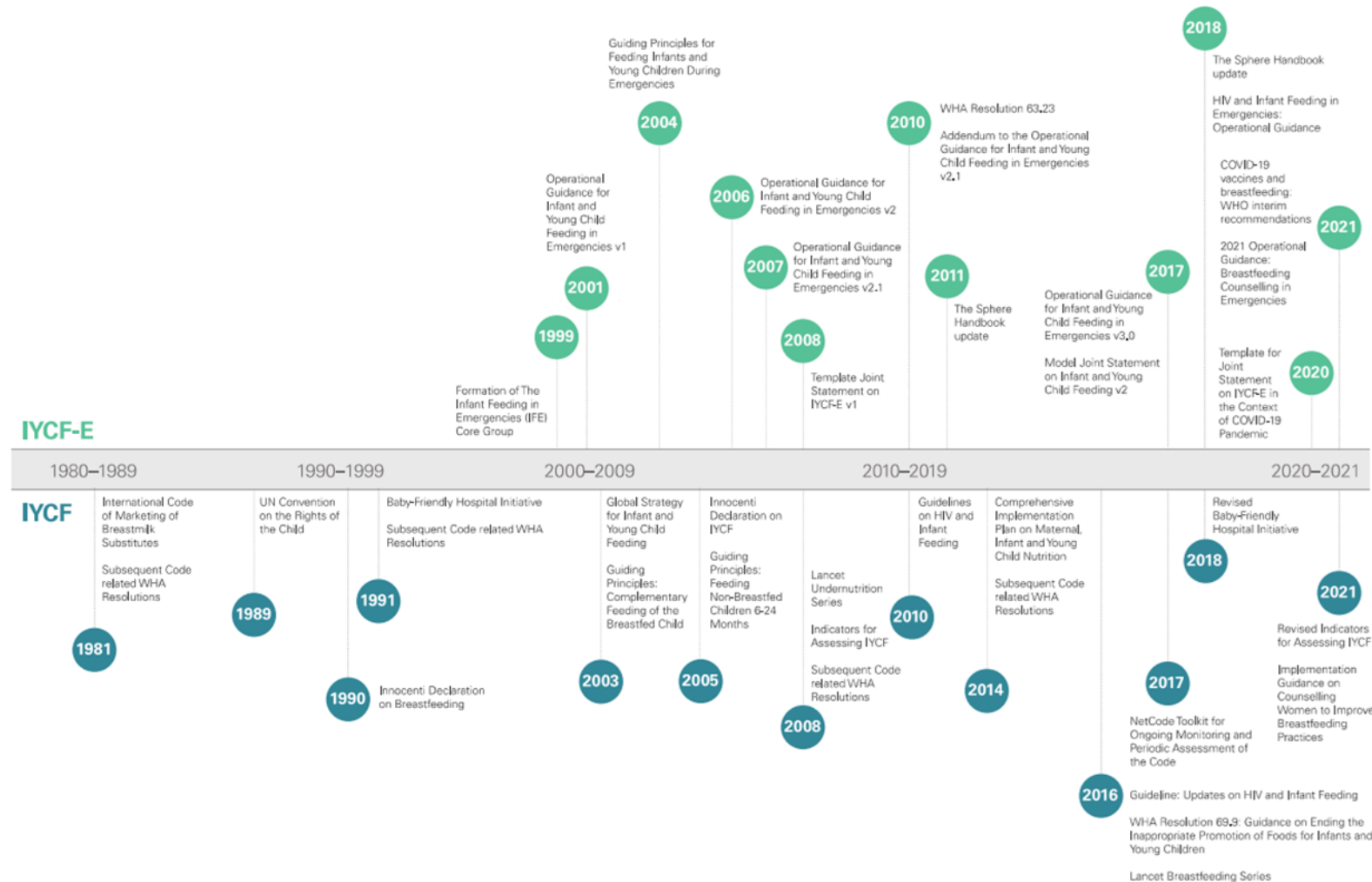
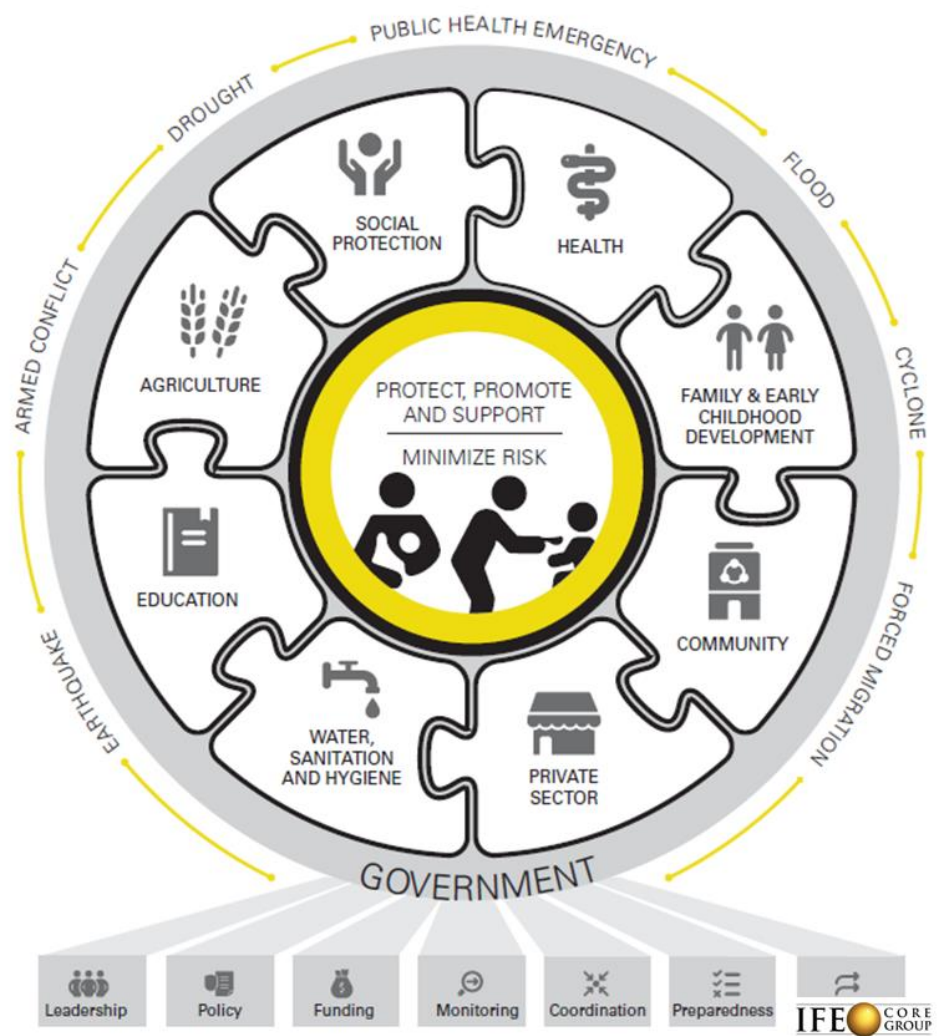


Figure 2: Infant and young child feeding milestones: Foundations for IYCF-E



# Next steps

- Discussion in working groups: where to from here?
- Communication and Advocacy plans
- Global Nutrition Policy Review 3 indicator inclusion and potential deep dive in policy documents



**Update on**

**IFE Core Group Annual Work Plan**

**IFE Core Group achievements for 2022**

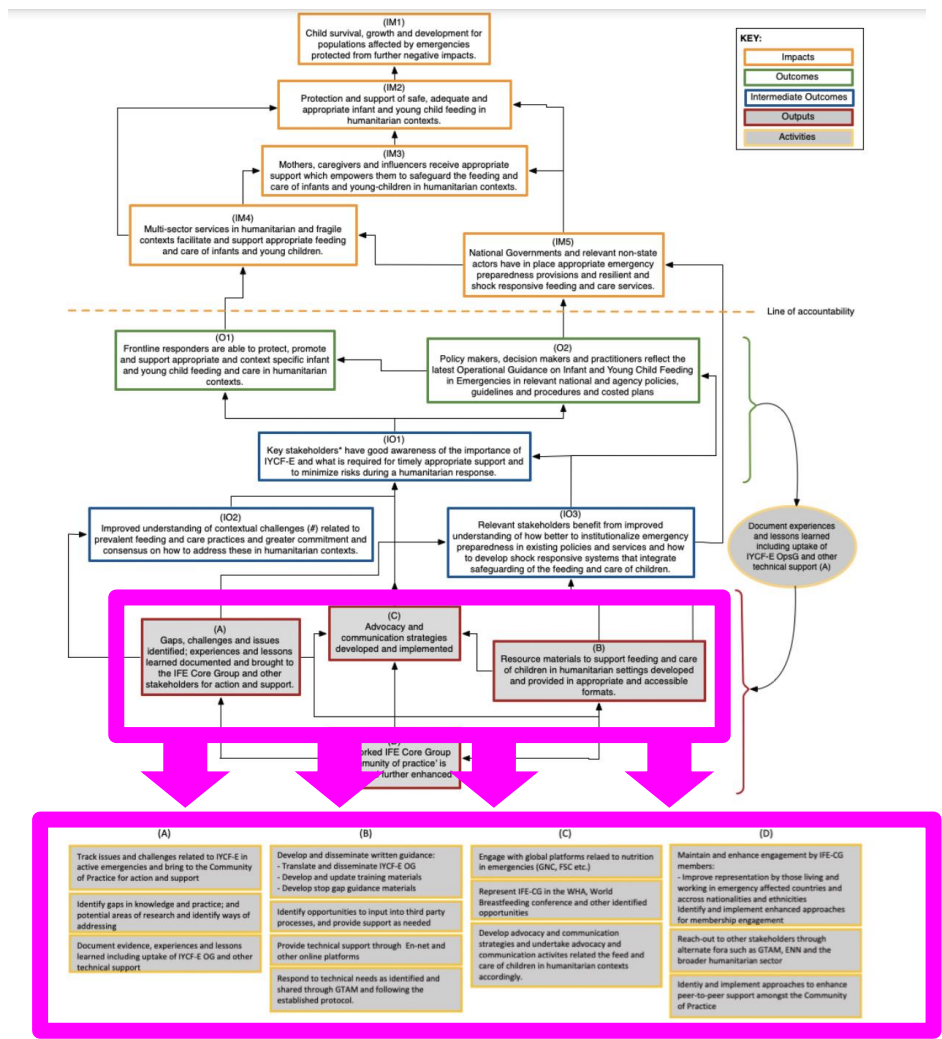
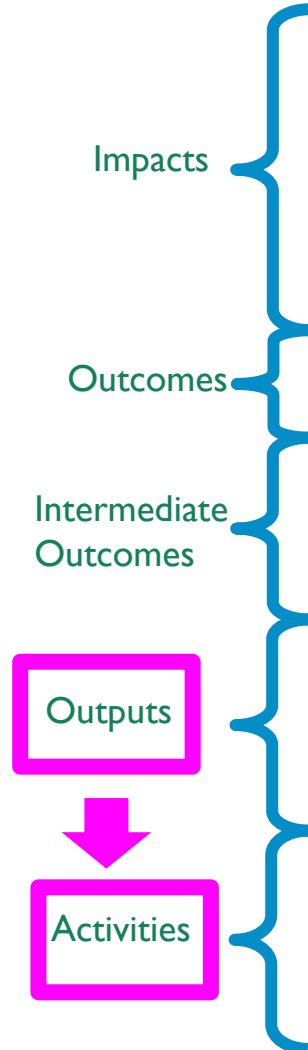


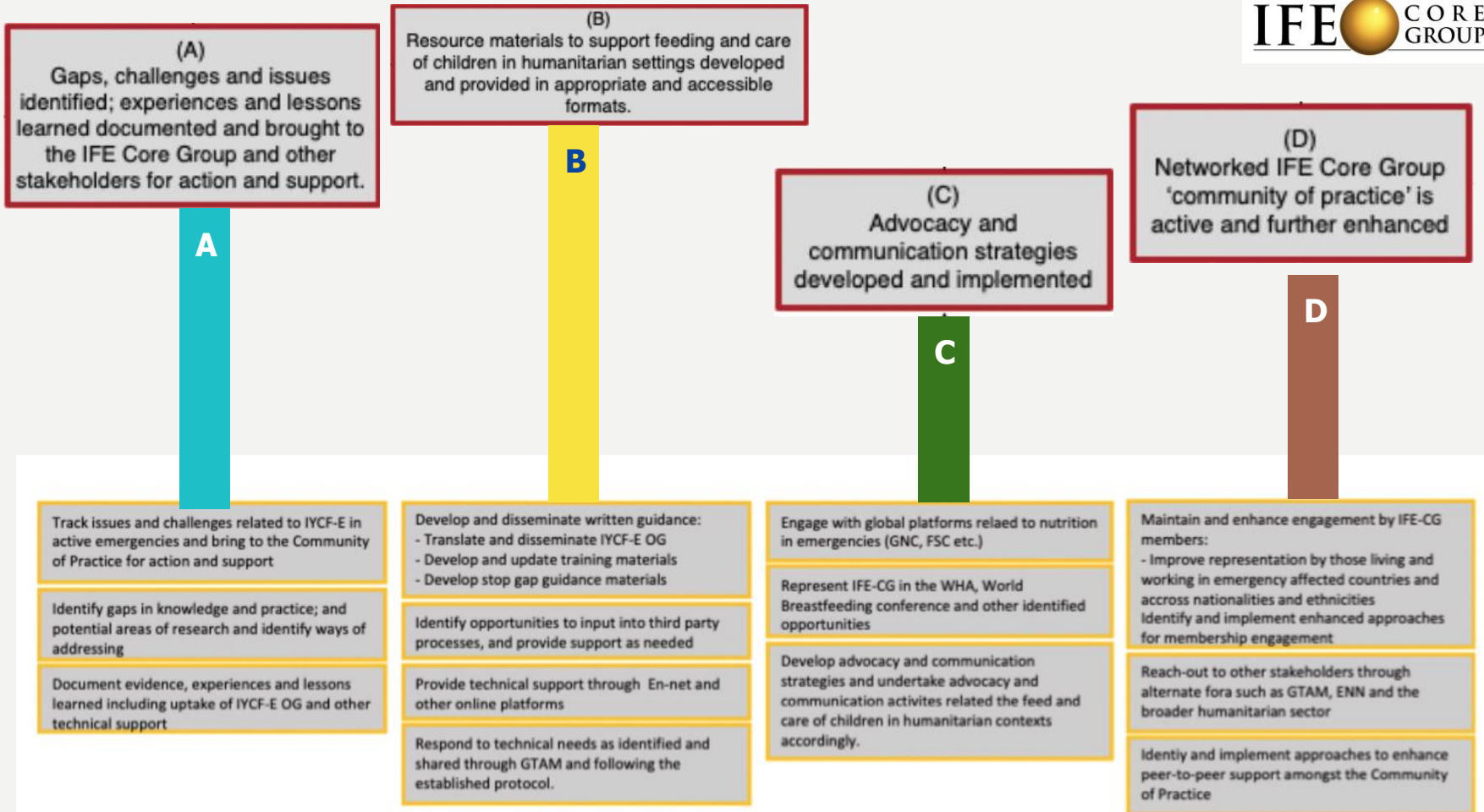
Have you been engaged in any of these activities?

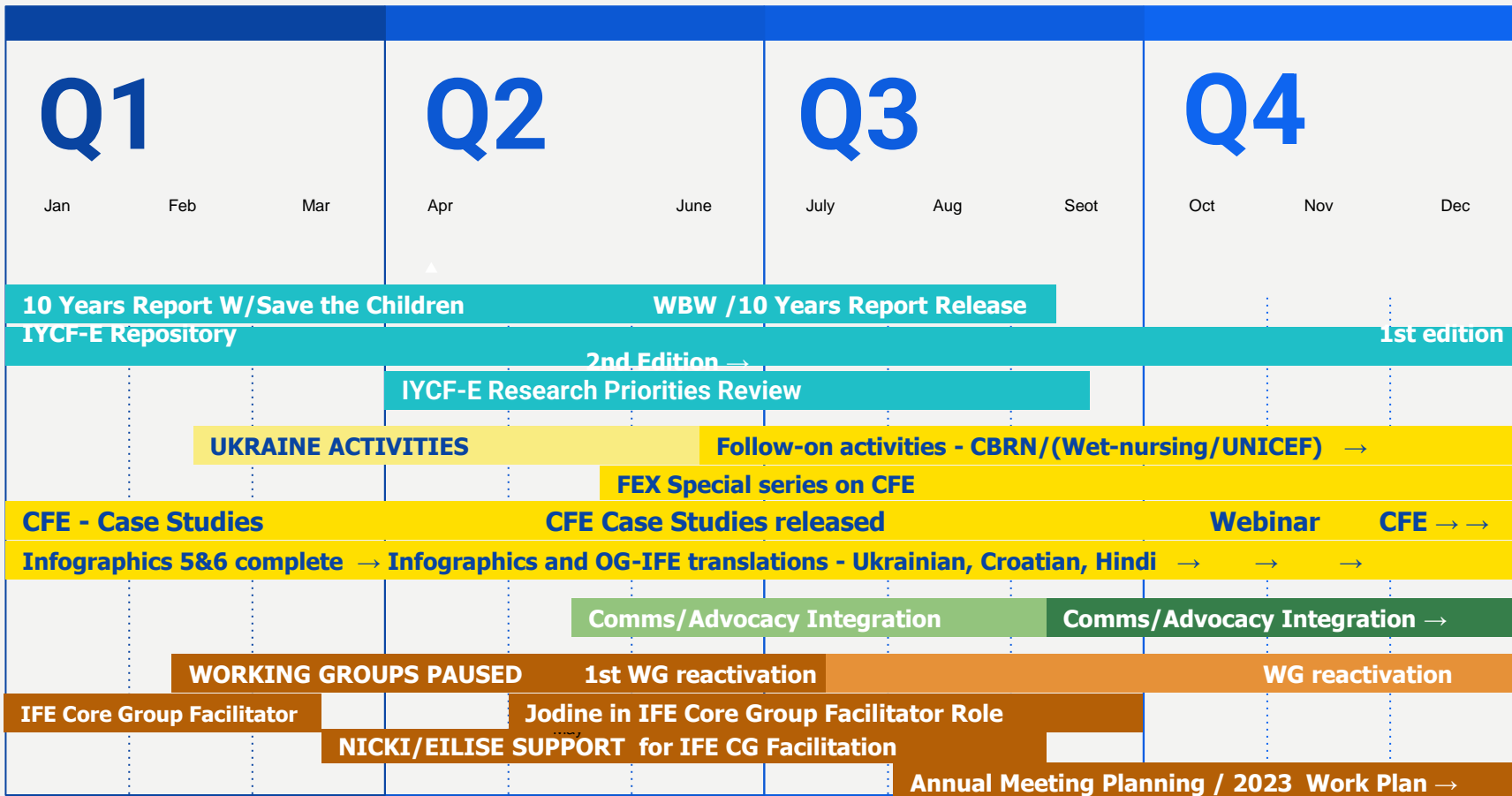
Click on  if you were!

# IFE CORE GROUP STRATEGY AND ACTION PLAN

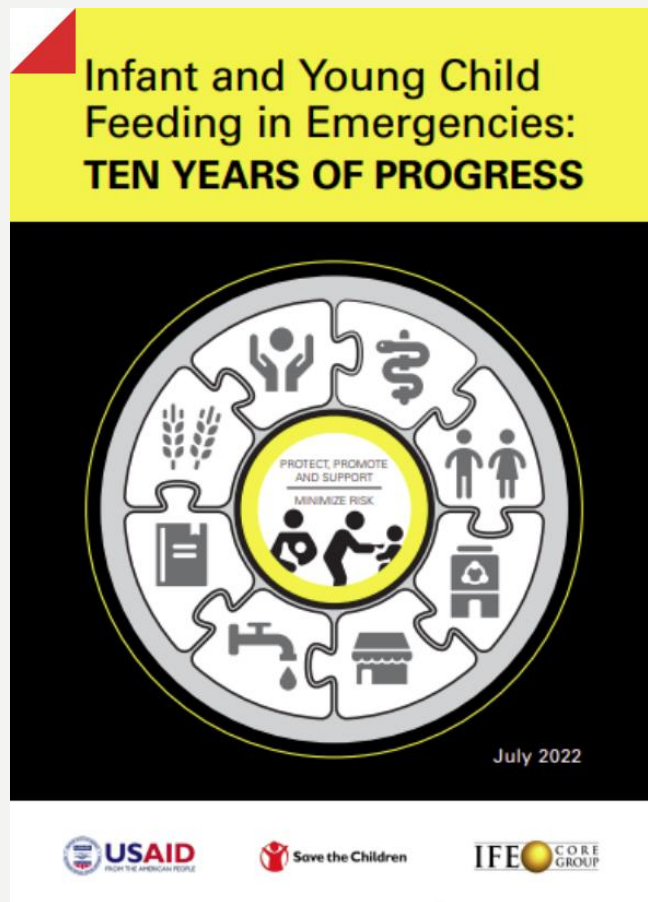








# IYCF-E Ten Years of Progress - report



A

Launched at GBC's WBW webinar



# TWO REASONS TO STEP UP FOR BREASTFEEDING

Wednesday August 3rd 2022

#stepupforbreastfeeding #IYCFE #MAMI #WBW2022









MSc Project Report  
2021-2022

“Ask any of us ‘can you show me the data?’ We barely have it”: A qualitative study of research priorities on infant and young child feeding in emergencies

Have you been engaged in any of these activities?

Click on  if you were!

# Nutrition for Growth Side Event



**IFE CORE GROUP**

## Infant Feeding in Emergencies

Learning from other countries' experiences  
他国の経験から学ぶ災害時の乳児栄養支援

TOKYO  
**NUTRITION  
FOR GROWTH**  
SUMMIT 2021

Food, Health, & Prosperity for All



SafelyFed  
Canada



alive&thrive  
nourish nurture grow

December 4, 2021



**Supported by**





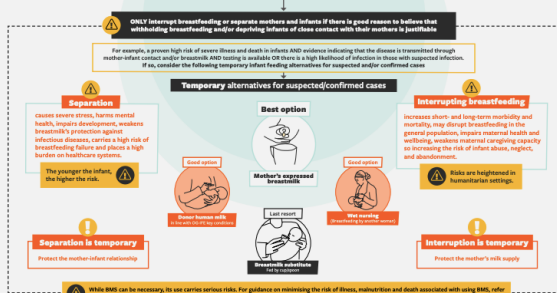
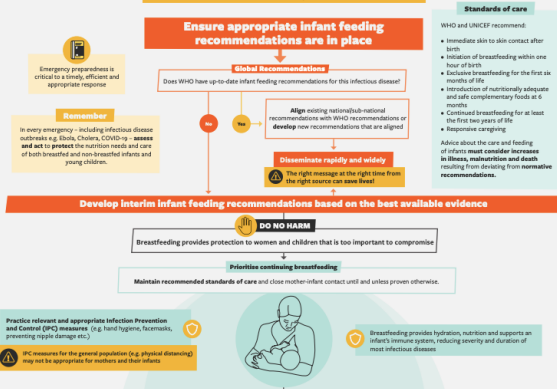




# Infographics 5&6

## INFANT FEEDING DURING INFECTIOUS DISEASE OUTBREAKS

A guide for national health authorities, health and nutrition policymakers, professional associations and other bodies and practitioners working in outbreak preparedness and response.



While BMS can be necessary, to use carries serious risks. For guidance on minimizing the risk of illness, malnutrition and death associated with using BMS, refer to the Operational Guidance on Infant and Young Child Feeding in Emergencies (IYCF-OGE), and the IYCF Core Group infographic on BMS support.

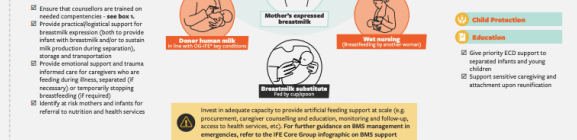
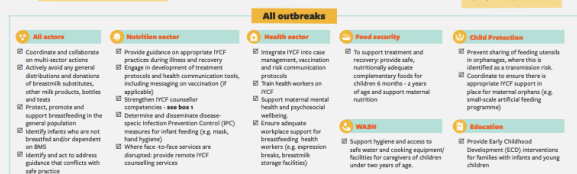
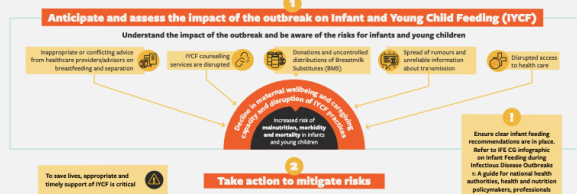
**Part of the Infant Feeding in Emergencies Core Group infographic series. Find out more at [www.emnline.net/ife](http://www.emnline.net/ife)**

For guidance on multisector actions to take, refer to the IYCF Core Group infographic on Infant Feeding during Infectious Disease Outbreaks. A guide for decision-makers and practitioners working in outbreak preparedness and response.

## INFANT FEEDING DURING INFECTIOUS DISEASE OUTBREAKS

A guide for decision makers and programmers working in emergency preparedness and response

In every emergency – including infectious disease outbreaks – assess and act to protect the nutrition needs and care of both breastfed and non-breastfed infants and young children



**Part of the Infant Feeding in Emergencies Core Group infographic series. Find out more at [www.emnline.net/ife](http://www.emnline.net/ife)**

\*Operational Guidance on Infant and Young Child Feeding in Emergencies

# Ukraine

UNICEF | for every child | IFE CORE GROUP

## Joint Statement

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

UNICEF the Global Nutrition Cluster, and Partners call for ALL involved in the response to the Ukraine Conflict Crisis to prevent, 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).

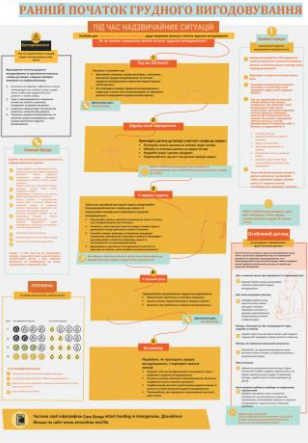
The expression of the conflict is expected to deepen and increase humanitarian needs for millions of Ukrainians. Malnutrition, illness, and death are expected to increase as a result of the conflict. It is in an extremely difficult situation facing high levels of stress and uncertainty, food shortages, unsanitary conditions, risk of communicable diseases, and heightened protection threats.

- #### Globally Recommended Infant and Young Child Feeding Practices
1. **Early initiation of breastfeeding** starting only in 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 an emergency, the youngest children are at the highest risk of stress and mortality; infants who are not breastfed are especially vulnerable, as the normal environment for accessing and ingesting protective breast milk 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 reduce breast milk production, provided mothers and infants remain together and are supported to initiate and continue breastmilk breastfeeding. This support entails practical support with attachment and positioning for breastfeeding, confidence building, and helping mothers and infants to breastfeed together (e.g., provide baby carers/nannies). It is recommended to draw upon existing breastfeeding support organizations and include active participation from Ukraine and neighboring countries.



IFE CORE GROUP

### IYCF-E Ukraine Key Messages

April 2022

Early and accurate communication on Infant and Young Child Feeding in Emergencies (IYCF-E) can save lives by supporting, promoting and protecting the nutrition of infants and young children in an emergency situation. During emergencies, breastfeeding is the strongest protection for your baby's health and nutrition.

Below are sample key messages to aid responders in effectively communicating to various audiences about IYCF-E in the Ukraine response. These messages were agreed upon through the Infant Feeding in Emergencies (IFE) Core Group Advocacy and Communication Working Group for Ukraine.

The first column outlines the main subject of the messages, while the second column are messages targeted to health care workers and helpers and the third are messages designed for parents and caregivers. The fourth and final column contains possible responses related to these messages.

Additional resources can be found on the Global Nutrition Cluster Ukraine Page at: <https://www.nutritioncluster.org/en/regions/ukraine-response>

	Health Care Workers/Helpers	For parents and caregivers	Possible responses
<b>Start breastfeeding</b>	Encourage women to initiate breastfeeding, ideally within the first hour after birth. Encourage women in the first 6 months (96 weeks) to exclusively breastfeed. Help women to do so (see contact with the mother to support breastfeeding).	Help the mother to see response for your baby and can help her with her health, do not see response for her milk or the baby. She can see her baby and can see response for other mothers of young children if you have any problems or concerns.	<ul style="list-style-type: none"> <li>• Ask for Professional Assistance: <a href="https://www.unicef.org/ukraine/infant-feeding">https://www.unicef.org/ukraine/infant-feeding</a></li> <li>• Ask for Support: <a href="https://www.unicef.org/ukraine/infant-feeding">https://www.unicef.org/ukraine/infant-feeding</a></li> <li>• Ask for Support: <a href="https://www.unicef.org/ukraine/infant-feeding">https://www.unicef.org/ukraine/infant-feeding</a></li> </ul>
<b>Keep breastfeeding</b>	Help women to continue breastfeeding for 2 years and beyond. Encourage women to continue breastfeeding for 2 years and beyond. Encourage women to continue breastfeeding for 2 years and beyond. Encourage women to continue breastfeeding for 2 years and beyond.	Help the mother to see response for your baby and can help her with her health, do not see response for her milk or the baby. She can see her baby and can see response for other mothers of young children if you have any problems or concerns.	<ul style="list-style-type: none"> <li>• Ask for Professional Assistance: <a href="https://www.unicef.org/ukraine/infant-feeding">https://www.unicef.org/ukraine/infant-feeding</a></li> <li>• Ask for Support: <a href="https://www.unicef.org/ukraine/infant-feeding">https://www.unicef.org/ukraine/infant-feeding</a></li> <li>• Ask for Support: <a href="https://www.unicef.org/ukraine/infant-feeding">https://www.unicef.org/ukraine/infant-feeding</a></li> </ul>

IFE CORE GROUP

### Ukraine summary of lessons learned and Feeding in Emergencies (IYCF-E)

March 2022

**Key messages**

- **Prevalence of Infant and Young Child Feeding (IYCF) practices:**
  - The Code has not been adequately implemented and enforced in Ukraine.
  - Malnutrition remains a concern among IYCF-E populations. Early initiation of breastfeeding (EIBF) within 1 hour of birth (61.5%), children under 6 months exclusively breastfed (EBF) (30.2%), continued breastfeeding at 1 (31.8%) and 2 years of age (21.5%) children under 6 months predominantly breastfed (61.5%) children 6-23 months breastfed (64.5%) introduction of solid, semi-solid or soft foods for children 6-23 months (43.1%).
- **Key findings from the early Ukraine crisis:**
  - There were widespread violations of the Code.
  - Providing breast milk substitutes (BMS), water and/or other complementary foods to children under 6 months of age was very common among IYCF-E.
  - Several reports noted that one of the primary reasons mothers stop breastfeeding was because of perceived dips in breast milk due to increased stress.
  - Due to the absence of acute malnutrition and the lack of understanding of the importance of IYCF, nutrition was not perceived a priority.
  - It is important to conduct early assessments to understand the context and to be able to advocate / raise the nutrition priority of the country.
  - Managing non-breastfed infants was a key challenge. There were challenges around preventing the unregulated distribution of BMS, especially by local and small civil society and religious organizations. A high demand for BMS availability, availability and limited cash reserves led to the dilution of BMS by mothers preparing soups. Actors reported that there were

This document was developed by the Infant Feeding in Emergencies (IFE) Core Group Sub-Working Group on Infant and Young Child Feeding in Emergencies (IYCF-E) in the context of chemical, radiological and nuclear threats. This document is for healthcare workers and emergency response planners and provides interim operational guidance to inform emergency plans and responses on appropriate infant and young child feeding (IYCF) in the first three days after a nuclear emergency caused by an accident at a nuclear power plant (NPP) in the context of the current Ukraine crisis. It does not cover IYCF in the context of nuclear warfare. Recommendations are provided in this document for breastfed and non-breastfed infants. Recommendations for breastfed infants are applicable to infants who are exclusively breastfed, mixed fed (i.e., receiving both breastmilk and breastmilk substitutes) and infants over six months of age and young children who are receiving complementary foods alongside breastmilk. The recommendations are based on the best available knowledge and full consideration of the risks associated with internal contamination by radioactive materials in the first three days after an incident at an NPP as well as the importance of breastfeeding. The recommendations of other organizations may focus primarily on the risk of exposure to radioactive materials without fully balancing the risks of mortality and morbidity associated with not breastfeeding. This guidance should be used in conjunction with existing guidance for the general public, healthcare workers and policy makers. For more information, please contact [ife@unicef.org](mailto:ife@unicef.org).

<https://www.unicef.org/ukraine>

Children below two years of age

• Contaminated and collected breast milk may be the safest food for infants after a nuclear emergency. However, the impact of the release of radionuclides is dependent on the radionuclides that are released, the time of day, the weather, the distance from the NPP, and the time of day after an NPP accident. For more information on radiation, please see Appendix 2.

This guidance note is based on a checklist developed by the IFE Core Group Sub-Working Group on Infant and Young Child Feeding in Emergencies in the context of chemical, biological, radiological and nuclear threats which is available upon request.

For information on what to do in the event of a nuclear weapon, an improvised nuclear device, a radiological exposure device or a dirty bomb please see: <https://www.fda.gov/radiation-emissions/nuclear-plant-accidents>

GUIDANCE NOTE: Infant and young child feeding in the first three days after a nuclear power plant accident | Aug 2022 | 1

# Strategies for IYCF in Climate-Related Emergencies - Webinar

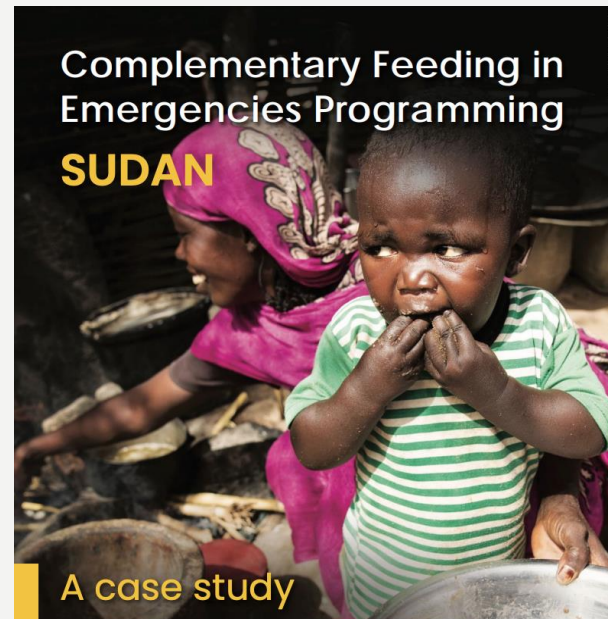
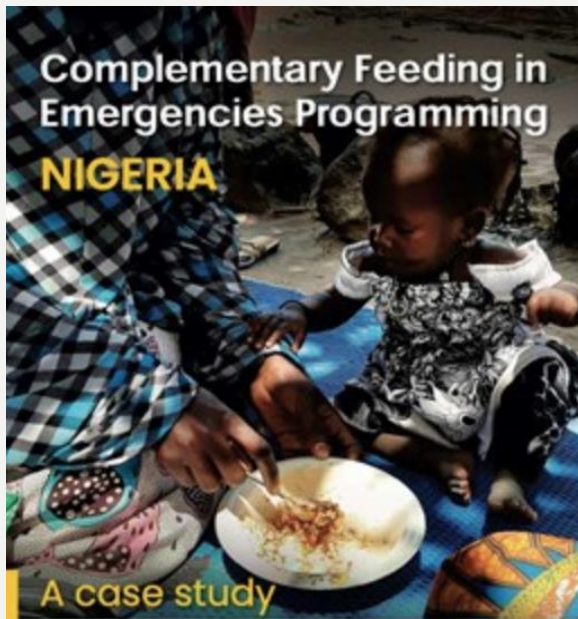


## Strategies for Infant and Young Child Feeding In Climate-Related Emergencies

21 March 2022

# Complementary Feeding in Emergencies

## - Case Studies



# Complementary Feeding in Emergencies Webinar

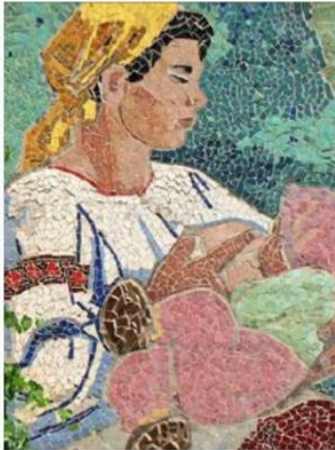
## Complementary Feeding in Emergencies Programming and Resources

September 8, 2022  
9:00-10:30 AM EDT





## Explore our Collections

[View all](#)


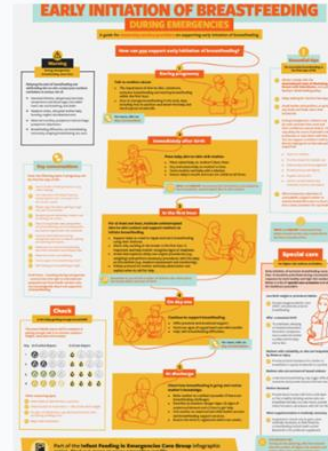
### Ukrainian Response Collection

13 resources in this collection  
Curated by IYCF



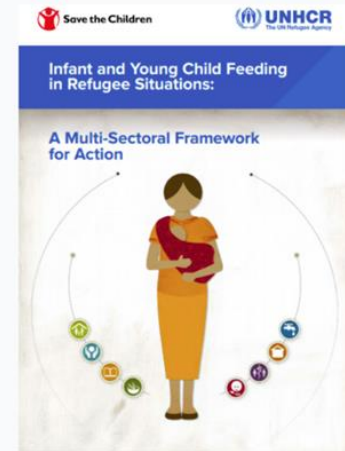
### Tools for Complementary Feeding Programming

85 resources in this collection  
Curated by IYCF



### IYCF-E Infographic Series

6 resources in this collection  
Curated by IYCF

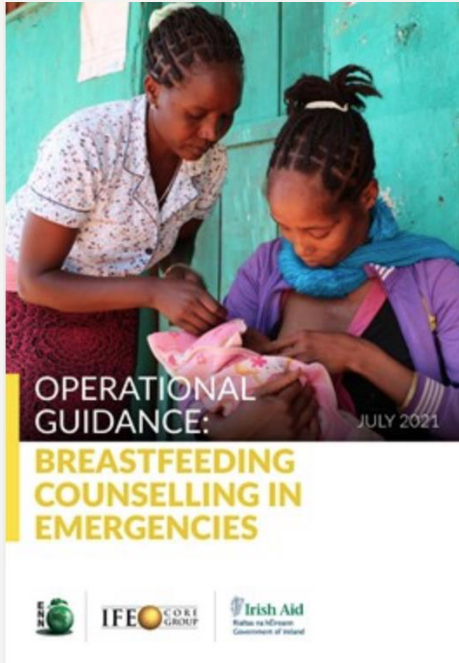


### Infant and Young Child Feeding Framework

13 resources in this collection  
Curated by IYCF

B

# Breastfeeding Counselling Guidance In Emergencies - Webinar



Publication: 27.09.2022

## Providing Breastfeeding Counselling During Emergencies: How Can We Do That?

18 OCT 2022

[Please register here!](#)

# Infographics and OG-IFE Translations

## Infographics (some)

English

French

Italian

Japanese

Russian

Arabic

Ukrainian

## Transit Guidance

English

Arabic

Farsi

Kurdish

Ukrainian

Polish

Russian

Ops Guidance on IFE v3 English

Ops Guidance on IFE v3 French

Ops Guidance on IFE v3 Spanish

Ops Guidance on IFE v3 Italian

Ops Guidance on IFE v3 Japanese

Ops Guidance on IFE v3 Bahasa Indonesia

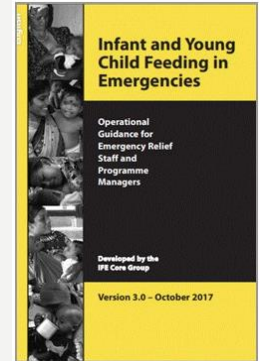
Ops Guidance on IFE v3 Bangla

Ops Guidance on IFE v3 Arabic

Ops Guidance on IFE v3 Swahili

Ops Guidance on IFE v3 Portuguese

Ops Guidance on IFE v3 Croatian



Have you been engaged in any of these activities?

Click on  if you were!

# Comms & Advocacy Social Media Toolkits

## World Breastfeeding Week ENN Social Media Toolkit

**Launch Date:** ASAP, then throughout 1-7 July

**Contact:** Rosaleen rosaleen@ennonline.net

Please use the following tools to help guide social media activity for dissemination of the:

- Global Breastfeeding Collective Webinar ([ENN link here](#))
- ENN Blog ([link here](#))
- RTE Brainstorm Blog (link coming)
- IYCF-E: 10 Years of Progress Report launch page ([link here](#))

Please feel free to personalize and share as relevant to your own involvement and networks. Please also tweet on other Breastfeeding resources from ENN, MAMI, IFE Core Group and FEX that you may have authored or worked on. Please also feel free to use [the toolkit from the Global Breastfeeding Collective](#).

We will be sharing content on the following social media channels:

**Twitter:** @ifecoregroup @ennonline @MAMIGlobalNet

**Facebook:** @theennonline

**LinkedIn:** Emergency Nutrition Network (ENN)

**Instagram:** @ennonline

We will be using the following hashtags, depending on amount of space available in messages: #IYCFE #WBW22 #StepUpForBreastfeeding #WorldBreastfeedingWeek2022 #TenStepsToSuccessfulBreastfeeding #BFHI #BabyFriendlyHospitalInitiative

IFE Core Group: IYCF-E Research Repository  
Social Media Toolkit

Launch Date: July 20, 2022

Contact: IFE Core Group [ife@ennonline.net](mailto:ife@ennonline.net)



**Rosaleen Cunningham** (She/Her) · 1st

Digital Communications Manager at Emergency Nutrition Network



ENN (Emergency Nutrition Network)



**Jodine Chase**

Communications expert.

Edmonton, Alberta, Canada · [Contact info](#)



IFE Core Group



Royal Roads University

## 2022 IFE Core Group Annual Workplan

Activity #

ACTIVITY

### OUTPUT A: Gaps, challenges and issues identified; experiences and lessons learned documented and brought to the IFE Core Group

**A.1.** Track issues and challenges related to active emergencies

**A.2.** Identify gaps in knowledge and practice; potential areas for improvement

A.2.1. Research priorities in IYCF-E: conduct a "Stock Taking" output A.2. in the [communications plan](#)

A	B	OUTCOME
<b>OUTPUT A: Gaps, challenges and issues identified; experiences and lessons learned documented and brought to the IFE Core Group</b>		
A.1.	Communicate on, encourage and facilitate participation in the process of identifying gaps and challenges	A.1.1. IFE Core Group members
A.2.	Communicate gaps and challenges in a clear, useable format developed to enable target audiences to support and take action	A.2. 1. Audience are kept up-to-date A.2.2. Conversations and content in a clear, useable format
<b>OUTPUT B: Resource materials to support feeding and care of children in humanitarian settings developed and provided to key stakeholders</b>		
B.1.	Ensure that high-quality IYCF-E resources are known (dissemination)	B.1.1. Up-to-date IYCF-E resources are available B.1.2. Key stakeholders in national and local settings are aware of where they can contribute to technical assistance B.1.3. Existing technical guidance is updated
B.2.	IYCF-E resources are clear and understood	B.2.1. IYCF-E guidance is presented in a clear, useable format B.2.2. Media, PR, comms teams are aware of where they can contribute to technical assistance
B.3.	IYCF-E resources are used by key stakeholders	B.3.1. IYCF-E guidance is included in national and local policies and plans B.3.2. Implementing partners are aware of where they can contribute to technical assistance
B.4.	IYCF-E professionals are aware of where they can contribute to technical assistance	B.4.1. Members are able to provide technical assistance



Have you been engaged in any of these activities?

Click on  if you were!

D

# 2021 Annual Report published 2022 Annual Meeting planned






Have you been engaged in any of these activities?

Click on  if you were!

A

**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Track issues and challenges related to active emergencies and bring to the Community of Practice for action and support




Identify gaps in knowledge and practice; potential areas of research and identify ways of addressing gaps




Document evidence, experiences and lessons learned including uptake of IYF-E OG and other technical support

**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Track issues and challenges related to active emergencies and bring to the Community of Practice for action and support



Activate and maintain the protocol/roadmap for tracking issues and challenges related to IYCF-E and report on them.\*

\* IFE Core Group monthly meeting agendas support reporting on challenges related to active emergencies using inputs from some channels, and leading to **action and support activities**


**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Identify gaps in knowledge and practice; potential areas of research and identify ways of addressing gaps



Research priorities in IYCF-E: **conduct a "Stock Taking" on IYCF-E research.**



Review of literature: **Build a system** to track new research / findings related to IYCF-E from both **peer reviewed literature** and grey literature. **Develop repository that can be sustained** to track issues and challenges related to IYCF-E.

A

# THE REPOSITORY

*access here*

an overview of what peer-reviewed journal  
articles currently state on IYCF in an  
emergency context




## Kenya Addison - recommendations

1. Research should be focused on the **effectiveness and implementation of different complementary feeding interventions** and how to **safely distribute breastmilk substitutes without compromising breastfeeding**.
2. Following this, research should be focused on the **effectiveness of re-lactation interventions** and **provision of psychological support for caregivers**, and the **integration of IYCF-E into other sectors**.
3. Evidence, regardless of whether it is operational or academic, **should be consolidated and made accessible among the IYCF-E community**.


**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Document evidence, experiences and lessons learned including uptake of IYFE OG and other technical support



Develop a report on implementation of IYCF-E policies and plans by countries and governments.



Develop communications plan and derivative products for A.3.1 report to support advocacy efforts



Maintain mapping of IFE-OG dissemination on IFE-CG website

**B**

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

**Develop and disseminate written guidance**

**Identify opportunities to input into 3rd party processes, and provide support as needed**

**Provide technical support through En-net and other online platforms**

**Respond to technical needs as identified and shared through Global Nutrition Cluster Technical Alliance and following the established protocol**



**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

### Develop and disseminate written guidance



Facilitate and encourage **translation** of the IYCF-E OG and other materials by a variety of means



Develop new material that help operationalise the IYCF-E OG



- Continue developing **infographics**



- Develop **new guidance or update existing guidance** based on current gaps identified: **FAQs, wet nursing and re-lactation in emergencies**



- Develop a **draft template of good practice operational guidance** that can then be set to develop national guidelines



- Develop **glossary** to standardise core terminology such as breastfeeding/ lactation; IYCF/ MIYCN, more inclusive language.

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats



Develop and update training materials based on the IYCF-E OG



Update the newly released [IYCF Counselling: an integrated course](#) with [additional modules](#) that could be used in [emergency contexts](#).



Identify opportunities to [integrate MAMI Care Pathway](#) into OG-related tools and training materials.



Develop an [e-learning course](#) on IYCF and [infectious diseases](#)



Maintain the availability of an up-to-date IYCF-E resources and material database



Organise a series of internal and external webinars that respond to gaps and challenges

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats



Conduct [Case Studies on Complementary Feeding in Emergencies](#)



Develop [CFE guidance for country implementation](#) based on the [CFE Case studies](#)



[Field Exchange](#) publications on [CFE](#)

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

**Identify opportunities to input into 3rd party processes, and provide support as needed**



Ongoing

**Review** tools/guidance produced by IFE Core Group members **Support updating of IYCF indicators and assessment tools** as appropriate and **encourage quality assessments** integrating IYCF indicators where possible.

**Provide technical support through En-net and other platforms**



Ongoing

Members to provide **support on en-net** and other online platforms.

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

**Respond to technical needs as identified and shared through Global Nutrition Cluster Technical Alliance and following the established protocol.**



Ongoing

Regularly engage and respond to GNC-TA as the Global Thematic Working Group on IYCF-E.

Examples:

- Support for Poland question on Code and European follow-on formula
- Cash Voucher Guidance discrepancy

Extraordinary - [Ukraine](#)

## Output C: Advocacy and communication strategies developed and implemented

Engage with **global platforms** related to nutrition in emergencies (GNC, NetCode, GBC, FSC, etc.)

**Represent** the IFE-CG in the WHA, World Breastfeeding Conferences and other identified opportunities

Develop **advocacy and communication strategies** and **undertake** advocacy and communication **activities** related to the feeding and care of children in humanitarian contexts

## Output C: Advocacy and communication strategies developed and implemented

Engage with **global platforms** related to nutrition in emergencies (GNC, NetCode, GBC, FSC, etc.)



Ongoing

Participate in global platform meeting (NetCode, GNC TWG, GNC, Global Breastfeeding Collective, and others as identified)

- 4 quarterly NetCode meetings
- 1 GBC meeting as guest speaker
- 10 GBC meetings (through Fatmata)

## Output C: Advocacy and communication strategies developed and implemented

**Represent** the IFE-CG in the WHA, World Breastfeeding Conferences and other identified opportunities



Ongoing

Represent the IFE-CG in identified opportunities according to a [calendar of events](#) and responding to activity C.3.4.



## Output C: Advocacy and communication strategies developed and implemented

Develop **advocacy and communication strategies** and **undertake** advocacy and communication **activities** related to the feeding and care of children in humanitarian contexts



Finalise and endorse a communications strategy (in all its components)



Develop a costed/resourced workplan to implement the communications strategy.



Incorporate a comms tool within the workplan for workstreams to do their own comms work



Define advocacy purpose based on priority issues, as identified through Output group A



Elaborate a system for responding to ad hoc national and global advocacy needs.

Develop an IYCF-E advocacy brief based on most recent evidence

**Output D:** Networked IFE Core Group ‘community of practice’ is active and further enhanced

Keep IFE CG membership data base up-to-date and respond to new membership



Map the group's current composition, identify gaps, and strategize



Implement a plan for increasing engagement with local/national



Conduct regular monthly meetings



Conduct Annual meetings



Update information on the ENN website



Conduct regular meetings with GNC-TA and participate in other fora (CIF-WG, etc.)



Facilitate peer-to-peer support via online communication and regular meetings

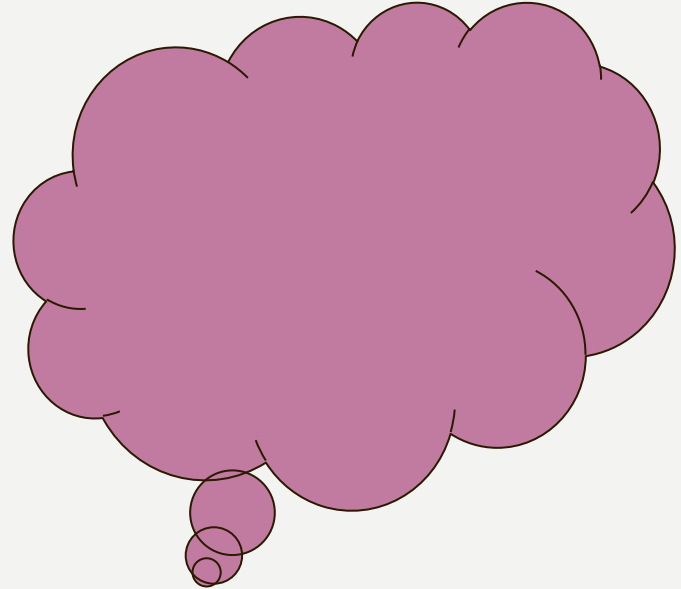
Thanks for all of you for your support in  
implementing these activities


And for all the important work that you do

Picture time!

**Break**

# This or That





# Gaps, challenges, enablers and priorities in IYCF-E

## Channel for identifying gaps, challenges, enablers and priorities

IYCF-E TWG

Field Exchange

En-net

Technical Support Team (TST)

IFE Core Group members

Internet / grey literature

Peer reviewed literature

UNICEF regional offices

Experts and researchers

Other platforms (GNC, GTWG, MAMI)

# Themes - AM

Challenges

Please enter themes that you think are emerging from the presentation

Gaps

Needs

Enablers



From our Strategic Plan: Both as individuals and as a collective, IFE Core Group members will:

- continue to track emerging issues and challenges related to infant and young child care and feeding practices in emergencies
- bring them to the attention of all IFE Core Group members and relevant groups and individuals for their attention, support and action

In order to:

- identify gaps in knowledge and practice and potential areas for research, which the IFE Core Group will seek to identify ways of addressing



# Help identify main themes

1. Visit [https://www.enonline.net/attachments/4904/IFE-Core-Group-Annual-Meeting-2022\\_Jamboard.pdf](https://www.enonline.net/attachments/4904/IFE-Core-Group-Annual-Meeting-2022_Jamboard.pdf)
1. Insert sticky notes with your thoughts

## Identification of Themes

- Have we missed any critical issue? or activity?
- What are future opportunities/priorities?



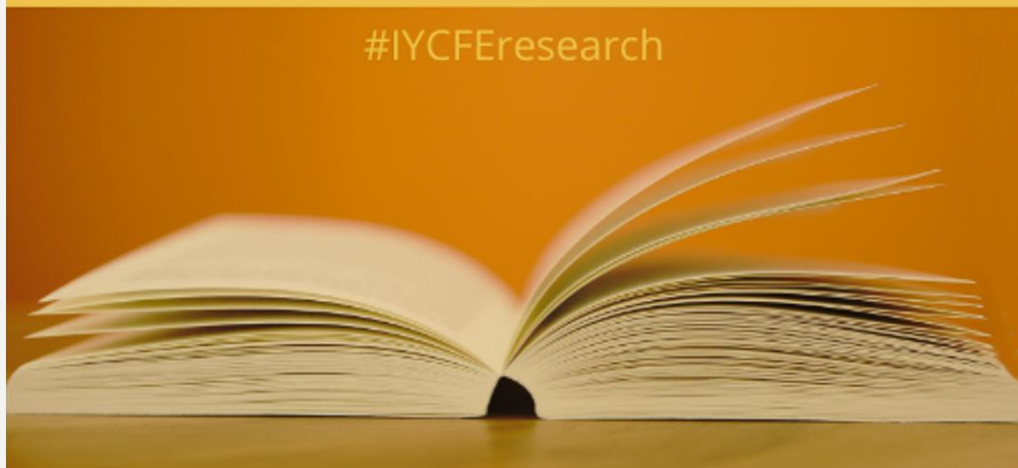
## THE REPOSITORY

A summary of peer-reviewed  
research on Infant and Young  
Child Feeding in Emergencies  
(IYCF-E)

---

[WWW.ENNONLINE.NET/IFE/IYCFEREPOSITORY](http://WWW.ENNONLINE.NET/IFE/IYCFEREPOSITORY)

#IYCFEresearch



## A.2.1.C

# Build a system to track new research/findings

(something like: thinner version of Johns Hopkins' COVID-19 repository)

(Key questions: Is there a need? Who is the audience (IFE-CG or beyond)? What are the key questions/topics? Resource needs: Search engine review (weekly) & writers. How to disseminate? Question of grey literature?

## A.2.1.C

Build a system to review research/findings

**Achieved**

A repository was established - work started March 2022, 1<sup>st</sup> launch July 2022

- **Audience:** anyone who wants to remain informed on publications on IYCF-E published in peer-reviewed journals
- **Focus:** 'What does the science tell us' on IYCF in emergency settings such as natural disasters, conflicts, displacement including refugee settings. (publications > 1 Jan 2022)
- **What is it:** short summaries, virtual library, hyperlinks, etc. *Quarterly*

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
<i>The most recent publications appear first in this document. Publications added in the 3<sup>rd</sup> Quarter 2022 update are highlighted in blue. We aim to publish updates every 3 months. The next update will occur in January, 2023.</i>							
Qualitative methods; refugees; breastfeeding; Turkey	20-Sep-22	<a href="#">Syrian refugee women's breastfeeding behaviors and use of contraceptive methods: a qualitative study</a>	Women & Health	Original Research	<p>This study sought to understand whether experiences of migration and contraceptive method choice affected breastfeeding practices in Syrian refugee women in Turkey using qualitative research methods. 15 women between 15-49 years of age who had been discharged from a state hospital in Ankara after delivering a full-term, healthy infant between 2018-2019 were included in the study. Study authors analyzed recorded audio interviews and used content analysis techniques to identify and interpret relevant themes. Most women initiated breastfeeding either in the delivery room or in their own hospital rooms depending on delivery method. Respondents reported a range of traditional practices related to improving breastfeeding, including consumption of a butter-like food called semin arabi to improve milk production. Though most of the respondents indicated that they would wait until after the infant was 6 months to begin weaning with complementary foods, some of the respondents reported interest in beginning weaning earlier. Most women reported not using medical contraceptive methods, though all reported that they did not intend to have further children. Study authors concluded that knowledge and use of contraceptive methods and breastfeeding by Syrian women in Turkey were insufficient and recommended additional training to mothers in this demographic and supplementing existing services with translation services.</p>	<p>This study sought to understand whether experiences of migration and contraceptive method choice affected breastfeeding practices in Syrian refugee women in Turkey. The authors argue that the refugee women have insufficient knowledge and use of contraceptive methods and optimal breastfeeding. Further support is needed in this area to overcome barriers to optimal reproductive and nutrition outcomes.</p>	<p>Demirhan Il, Peksoy Kaya S, Sahin S, Kaplan S. Syrian refugee women's breastfeeding behaviors and use of contraceptive methods: a qualitative study. Women &amp; Health. 2022:1-9.</p>

**Currently 37 publications**

**Approx. 12 new publications per quarter**

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
Disaster Relief; Mitigation; Disaster Response; Disaster Preparedness	23-Feb-22	<a href="#">Pediatrician's Leadership Role: Evaluation of the Needs of Children and Mitigation After Disasters</a>	Pediatrics	Abstract	The Puerto Rico Chapter of the American Academy of Pediatrics (PRAAP) designed and implemented activities to evaluate and address the needs of Puerto Rican infants, children, and their families in the recent wake of multiple natural disasters and the COVID-19 pandemic. The reason for this work stems from PRAAP pediatricians' unique role supporting the health and well-being of children and their families in disaster preparedness, response, and mitigation settings. Activities in response to disasters included e.g., providing healthcare services in pediatric clinics, interviewing families for needs assessment, visiting impacted communities including shelters, providing educational materials on best practices to protect children's health in disaster settings, organizing donations, and collaborating with government and local response organizations. The educational materials addressed, among others, infection control particularly in overcrowded conditions, safe sleep, infant feeding, injury prevention, proper use of sunscreen and insect repellent, asthma management and mental health. PRAAP reported their services reached all areas of the island. Ultimately, PRAAP state that pediatricians have the unique opportunity, skills, and experience to advocate for children's needs in disaster and pandemic contexts.	This abstract lists implemented activities and educational materials from the Puerto Rico Chapter of the American Academy of Pediatrics to evaluate and address the needs of Puerto Rican infants, children, and their families in the recent wake of multiple natural disasters and the COVID-19 pandemic. The authors argue pediatricians have a unique role to support the health and well-being of children in disaster settings.	Calderon C, Pedrogo Y, Huerta-Montañez G, et al. Pediatrician's Leadership Role: Evaluation of the Needs of Children and Mitigation After Disasters. Pediatrics February 2022; 149 (1 Meeting Abstracts February 2022): 23.
Breastfeeding; Lactation; Infant Feeding; Hurricane disasters; Natural disasters; Disaster relief; Disaster response; Emergencies; Puerto Rico	23-Feb-22	<a href="#">Breastfeeding, a Vital Response in Emergencies</a>	Pediatrics	Abstract	In this meeting abstract, the American Academy of Pediatrics (AAP) - Puerto Rico Chapter implemented a breastfeeding initiative as a vital response to threatened safe infant feeding after the 2017 Hurricanes, Irma and Maria. The intervention aimed to train first responders on the importance of preserving breastfeeding during emergencies and provide strategies to support, protect and promote safe routines from pregnancy, labor and infancy. Participants included health professionals, childcare workers, teachers, and allied personnel in charge of shelters. Participants were identified through a basic survey, and pre and post-test evaluations were conducted. Activities were conducted through full-day workshops and seminars and included: (1) an introductory prenatal breastfeeding course, a review of reference tools, (2) a demonstration of basic breastfeeding techniques and checklists for essential equipment, (3) distribution of documents on optimal disaster management of safe infant feeding, infant feeding during disasters, and pamphlets on parents and health professionals. The training resulted in the design and distribution of protocols, checklists to be used during natural disasters, and independent lactation stations for maternal-infant feeding. Participants understood the role of caretakers and health advisors in safe infant feeding. The authors concluded that preparedness and organization are critical for families to identify and protect their efforts to preserve safe infant feeding during emergencies.	This meeting abstract described activities implemented in Puerto Rico during a breastfeeding intervention in response to the 2017 Hurricanes Irma and Maria. A pre and post-evaluation was conducted, and the results showed that caretakers and health advisors gained knowledge about safe infant feeding during emergencies. According to the authors, preparedness and organization are critical for families to identify and protect breastfeeding efforts during emergencies	Piovanetti Y, Calderon C, Budet Z, et al. 2022. Breastfeeding, a Vital Response in Emergencies. Pediatrics.
Breastfeeding; chest feeding; child nutrition; infant feeding; refugees; displaced peoples; Turkey; Syria	14-Feb-22	<a href="#">Breastfeeding practices among Syrian refugees in Turkey</a>	International Breastfeeding Journal	Original Research	This study sought to assess the opinions of Turkish and Syrian healthcare workers, and perceptions and attitudes of Syrian, others, and family members on age-appropriate breastfeeding, to identify specific cultural characteristics of Syrian refugees on infant feeding and effects of migration it also aimed to collect suggestions of healthcare workers and Syrian family members on how to improve breastfeeding practices among Syrian refugees. 46 structured focus group discussions involving 335 individuals were conducted online and in-person, across 4 provinces in Turkey between Sept-Oct 2020. Primary cultural characteristics identified in focus groups as contributing to short breastfeeding duration include the belief that breastfeeding has a negative effect on the mother, utilization of anise or herbal teas to calm infants for sleep, being unable to breastfeed during Ramadan, wanting to prioritize the husband	The primary contributions of this research to existing literature are: (1) the identification of gaps in knowledge and practice on breastfeeding, lactation, and neonatal nutrition among Syrian refugee mothers, families, and Turkish and Syrian healthcare workers, (2) increased documentation and	Yalçın SS, Erat Nergiz M, Elici ÖC, et al. Breastfeeding practices among Syrian refugees in Turkey. <i>Int Breastfeed J.</i> 2022;17(1):10. Published 2022 Feb 14.

## Infant and Young Child Feeding in Emergencies (IYCF-E) - What Does the Science Tell Us?

### *A scientific repository*

On this page you find a repository that provides an overview of what peer-reviewed journal articles currently state on Infant and Young Child Feeding (IYCF) in an emergency context. It is compiled for the IFE Core Group by the Johns Hopkins Center for Humanitarian Health at Johns Hopkins Bloomberg School of Public Health, the Friedman School of Nutrition Science and Policy at Tufts University and the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill.

The repository aims to provide the reader with a snapshot of what is published with updates on a quarterly basis. All publications provide emerging evidence related to IYCF in emergency settings such as natural disasters, conflicts, displacement including refugee settings.

The repository originates from the identified need to develop a system to compile and share new IYCF-E research and build a virtual library of some of the most recent findings.



f t Dili Seçin

Google Çeviri

### Download and bookmark

- Preferred Citation
- Citation Tools

### Tags for this page

- IYCF (Infant and Young Child Feeding)

### About this page

- Updated on 19 October 2022
- 2,947 views

[IYCF-E Repository | ENN \(enonline.net\)](https://www.enonline.net/ife/iycferepository)

<https://www.enonline.net/ife/iycferepository>

## Meet the Team

## Click Here for the Latest Research

## About the Repository

### Infant and Young Child Feeding in Emergencies (IYCF-E) Literature Repository

The Infant and Young Child Feeding in Emergencies (IYCF-E) Literature Repository is a collaborative effort between the Johns Hopkins Center for Humanitarian Health, the Tufts University Center for Humanitarian Health, and the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill.



**Mary Anne Brennan** is a PhD student in the Center for Humanitarian Health and the Department of Health, Behavior, and Society at Johns Hopkins University.

**Erin Beal** is a PhD student in the Center for Humanitarian Health and the Department of Health, Behavior, and Society at Johns Hopkins University.

**Susannah Brumback** is an MPH student in the Center for Humanitarian Health and the Department of Health, Behavior, and Society at Johns Hopkins University.

**Michelle Palmer** is an MPH student in the Center for Humanitarian Health and the Department of Health, Behavior, and Society at Johns Hopkins University.

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The repository covers abstracts. The repository Publications are science to your inbox.

## Science to your inbox

If you would like to receive quarterly updates on the new resources uploaded to the repository please subscribe below and you will be added to our listserv.

Subscribe

### Infant and Young Child Feeding in Emergencies (IYCF-E) – Literature Repository

January 1 – June 30, 2022

Gerald J. and Dorothy R. Friedman School of Nutrition Science and Policy

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
Breastfeeding, Early Earthquake, Social Support, Breast Milk Substitutes, Displacement, Infant Feeding.	15-Jun-22	Breastfeeding and Substitution: the experiences of pregnant and lactating women in Abruzzo, Italy.	International Breastfeeding Journal	Original Research	In this qualitative descriptive study, pregnant and lactating women (during the April 6th, 2009, L'Aquila earthquake) were interviewed regarding their experiences with pregnancy, childbirth, and infant formula for complementary feeding during and after the emergency. The earthquake displaced 66,000 people, damaged over 100,000 buildings, and caused 1400 casualties and 309 deaths. It has been recommended that during such humanitarian emergencies, breastfeeding should be prioritized along with other optimal IYCF practices. Following the earthquake, the Alimentazione Infantile Nelle Emergenze – Infant Feeding in Emergencies working group interviewed pregnant women who were affected by the earthquake. The semi-structured interviews consisted of questions relating to pregnancy, childbirth, breastfeeding, breast milk substitutes, essential needs,	This study focuses on the needs of mothers and their children during and after the 2009 L'Aquila earthquake. Secondary analysis of semi-structured interviews conducted during and after the emergency revealed that exposed infant formula management, formalizable community support, and emergency responsiveness to IYCF should be prioritized for the protection of maternal and infant health, if	Giusti A, Marchetti F, Zambelli F, Pini E, Berio E, & Colacelli S (2022, June 15). Breastfeeding and humanitarian emergencies: The experiences of pregnant and lactating women during the earthquake in Abruzzo, Italy. International Breastfeeding Journal, BMC Med Central.

and Access.

### What is the repository and how is it being used?

The repository is a collaborative effort between the Johns Hopkins Center for Humanitarian Health, the Tufts University Center for Humanitarian Health, and the Gillings School of Global Public Health at the University of North Carolina at Chapel Hill. It is a free, open access resource for researchers and practitioners in the field of IYCF-E. The repository is currently being used by researchers and practitioners in the field of IYCF-E to access and share research findings.

### How can I contribute to the repository?

Researchers and practitioners in the field of IYCF-E are encouraged to contribute to the repository by submitting abstracts and full-text articles. The repository is currently accepting abstracts and full-text articles for review. The repository is currently accepting abstracts and full-text articles for review.

### How can I contact the repository?

For more information about the repository, please contact the repository administrators. The repository is currently accepting abstracts and full-text articles for review.



# Dissemination

## Website access and distribution

- 128 subscribers to the listserv
- 1,202 unique page views across 89 countries
- Shared on En-net

## Social Media

Twitter (ENN and IFE Core Group posts on the Repository)

- Total impressions – 14186
- Engagements – 742
- Click throughs – 86

Across LinkedIn (all posts on Repository)

- Impressions 1,400
- Click throughs 37

We need your ideas and help!



**QMNC Research Alliance** @QMNC\_Research · Oct 19

Good to see the work of [#QMNC](#) member Deborah Davis featured here: "Birth Outcomes, Health, and Health Care Needs of Childbearing Women following Wildfire Disasters: An Integrative, State-of-the-Science Review" [#BirthResearch](#) [#IYCFresearch](#)

**IFE Core Group** @IFECoreGroup · Oct 19

Science in your inbox! Aug-Sept/22 [#IYCFresearch](#) now out: 14 new publications from Turkey, Uganda, Guinea-Bissau, Thailand, Australia, Israel, Brazil, Canada, the United States, Poland, Croatia, Germany, Lithuania, Ukraine, and Indonesia. [ennonline.net/ife/iycferepos...](http://ennonline.net/ife/iycferepos...)

[Show this thread](#)



# THE REPOSITORY

# Social Media

**IFE Core Group** @IFECoreGroup · 4d ...

See articles on:

- impacts of natural disasters & [#climatechange](#) on [#IYCF](#).
- ways to better meet needs of refugee mothers in host countries
- effect of the [#C19](#) on IYCF
- challenges in policy and implementation, particularly enforcement of the [#WHOCCode](#)

1 2 7

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**IFE Core Group** @IFECoreGroup ...

We aim to publish updates every 3 months - look out for our next [#IYCFresearch](#) repository update in January 2023. Want it in your inbox? Sign up for updates here:



Fill | Infant and Young Child Feeding in Emergencies (IYCF-E) Repository  
forms.office.com

6:38 AM · 10/19/22 · [Twitter Web App](#)

4 Retweets 7 Likes

---

**IFE Core Group** @IFECoreGroup · 4d ...


Science in your inbox! Aug-Sept/22 [#IYCFresearch](#) out: 14 new publications from Turkey, Uganda, Guinea-Bissau, Thailand, Australia, Israel, Brazil, Canada, the United States, Poland, Croatia, Germany, Lithuania, Ukraine, and Indonesia. [enonline.net/ife/iycferepos...](https://enonline.net/ife/iycferepos...)



Paul Zambrano and Gita G. Yulilania Okinarum

1 6 14

**IFE Core Group** @IFECoreG... · 10/10/22 ...

 on [#IYCFresearch](#): Global evidence of persistent violations of the [#BMSCCode](#): A systematic scoping review w/ [@PaulZ\\_Nutrition](#), [@CONSTANCECHING4](#), , [@MathisenRoger](#) The scoping review found 13 articles identifying [#WHOCCode](#) violations related to emergency programs [#IYCFE](#)

1 6 9

# Future plan

- **Small amount of funding**

- Microsoft Power BI (interactive database)
- Coordination/Supervision support (in-kind academic supervision; and new coordinator (24 hrs/month) paid by Johns Hopkins until Feb2023)

- **Inclusivity** – universities from Asia, Africa, Europe, Oceania, Americas (peer learning) -> **Global**

- **Scope** - should we include < 2022?

## Channel for identifying gaps, challenges, enablers and priorities

IYCF-E TWG

Field Exchange

En-net

Technical Support Team (TST)

IFE Core Group members

Internet / grey literature

Peer reviewed literature

UNICEF regional offices

Experts and researchers

Other platforms (GNC, GTWG, MAMI)

# Field exchange



## Views

**Prioritising Emergency Response Preparedness: Global Nutrition Cluster supports countries to plan for potential humanitarian crises**

Synergies?

## **Facilitators of 'good' and 'poor' practice in the distribution of infant formula: Evidence from the 2014–2016 refugee crisis in Europe**

This is a summary of the following paper:

Gribble K & Palmquist A (2021) 'We make a mistake with shoes [that's no problem] but... not with baby milk': Facilitators of good and poor practice in distribution of infant formula in the 2014–2016 refugee crisis in Europe. *Maternal and Child Nutrition*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8710125/>

- Lack of support for maintaining IYCF in factory workers leads to low breastfeeding rates for those in the care of grandparents.
  - Resilience
  - Preparedness
- Refugee Crisis research: factors that contributed to 'poor practice' were the presence of infant formula donations, the absence of properly managed formula feeding programmes, the belief that maternal choice to formula feed is paramount and should be facilitated, and personal experience of insurmountable breastfeeding challenges and/or formula feeding.

# En-net

- Since Jan 2022 - 28 posts (25 questions) in the the IYCF thematic area.
- Lots of engagement from members of the IFE Core Group
- Question with the highest number of views (2133): ‘Can fresh milk be introduced when the child is below 1 year?’”

Novavax safety when breastfeeding

How to define "successful" relactation?



What informs the OG stipulation that BMS should not be donated?

What is good counselling for complementary feeding?

How long do you boil water for 1. infant formula use and 2. sterilisation of bottles?

How, as an IYCF Counsellor, to refuse requests for infant formula?

# Grey literature





News & Opinion | Politics | Health | Culture | Ms. Studies | Women & Democracy

GLOBAL, HEALTH, JUSTICE & LAW, POLITICS, VIOLENCE & HARASSMENT

## Breastfeeding in a War Zone

5/21/2022 by ROBERTA STALEY



Marlia Ismahulova, her daughter Amina, 16 months, and her son Marat, 4 years old. (Courtesy)

As [Ukrainian families flee](#) Russian brutality, women, children and especially infants are vulnerable to another scourge of war: disease and hunger. Health experts advocate breastfeeding over infant formula to keep babies healthy in the midst of bombardment and displacement.

On Feb. 24, when Russia's missiles first struck Ukraine's capital of Kiev, Marlia Ismahulova and her daughter Amina, 16 months, and son Marat, 4 years old, fled underground to escape missile strikes. The next day Russian tanks rolled in, and Ismahulova, the children and husband Alav Ismahulov drove 500 kilometers

## A formula for disaster

May 24, 2022 / PLOS Global Public Health / Global Health

G f t v +




## As climate change worsens hurricane season in Louisiana, doulas are ensuring parents can safely feed their babies

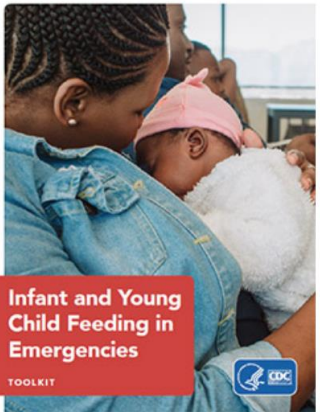
A doula collective is training emergency responders from across the state in best practices, filling a crucial gap in disaster response.

When Hurricane Laura hit Louisiana in August 2020, over 20,000 residents from the southeastern part of the state fled their homes for New Orleans. A central evacuation resource hub where evacuees could go to find basic necessities like food, water and clothing was set up downtown.

Michelle Robinson is a doula and certified lactation consultant about with


Journalists: Submit articles and comments here

Published May 5, 2022



## Infant and Young Child Feeding in Emergencies

TOOLKIT



halee Palmquist

ula shortage to reach white n the commercial formula indi

## During a formula shortage is the perfect time to talk about milk sharing

PROMOTE HEALTHY PEOPLE, HEALTHY PLANET AND IMPROVE CARE FOR ALL, CAROLINA GLOBAL BREASTFEEDING INSTITUTE, FACULTY NEWS, MATERNAL AND CHILD HEALTH NEWS, PRACTICE NEWS

August 18, 2022

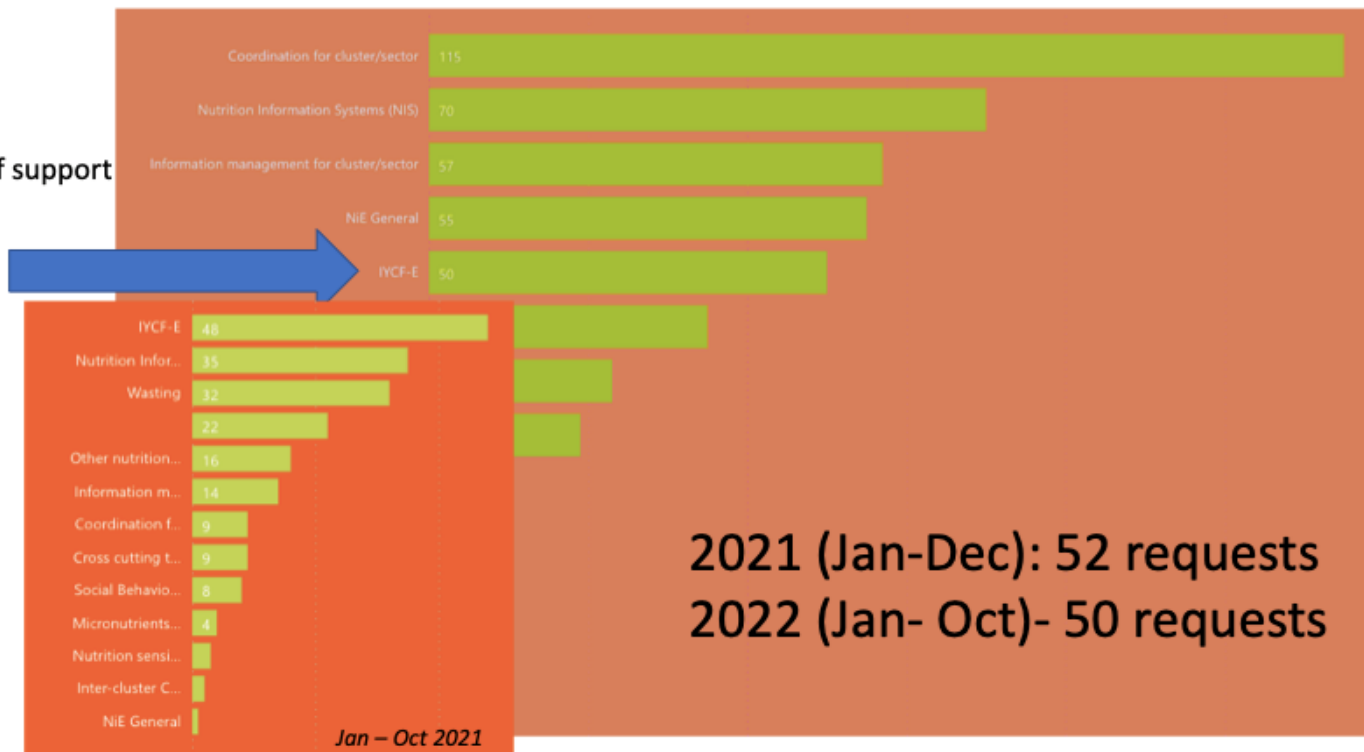
By Robert A. Poarch

A lot of mothers were surprised when they saw the bare shelves in their local grocery stores where the formula milk was supposed to be. For one mother, medical anthropologist [Aunchalee Palmquist, PhD](#), the situation seemed almost inevitable — and it provided an opportunity to discuss human milk sharing.

# GNC Technical Alliance Technical Support Team

## Requests by thematic area

50 IYCF-E requests  
5<sup>th</sup> requested type of support



In 2021 IYCF-E was the most requested type of support, however this year there has been a specific focus on strengthening coordination (the GNC Coordination team joined the TST).

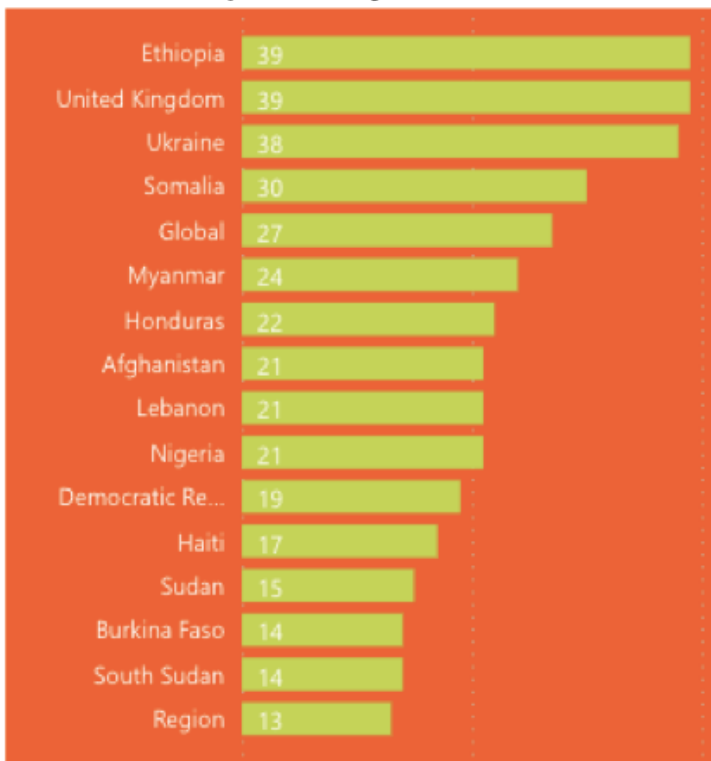
2021 (Jan-Dec): 52 requests  
2022 (Jan- Oct)- 50 requests

Jan – Oct 2021



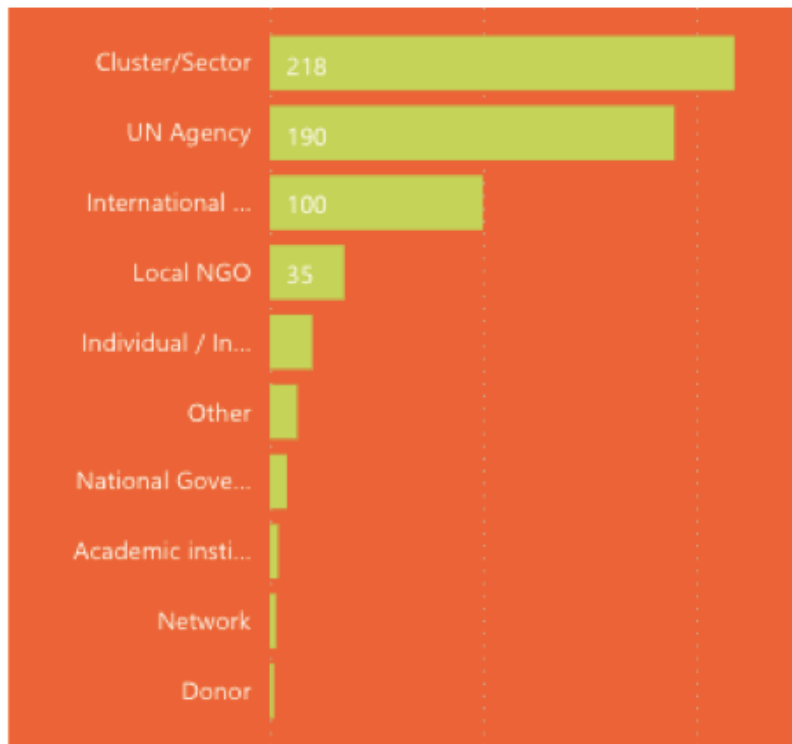
# GNC Technical Alliance Technical Support Team

## Requests by Location



# GNC Technical Alliance Technical Support Team

Who requests support?



# GNC Technical Alliance Technical Support Team

**IYCF-E in-depth support** (*8-12 weeks/remote or in-country*)

**Main Countries:** Haiti, Burkina Faso, Ukraine, Afghanistan, Ethiopia, Mozambique, LACRO, Honduras, Mali

**Main Themes:**

- Regional and national **operational guidance development**
- IYCF-E **capacity assessment**
- **BMS guidance** including monitoring and reporting
- **Non-breastfed infant** guidance and training
- IYCF-E **TWG development**
- Emergency response **priority actions**
- **Breastfeeding counselling** capacity building
- **Gender and GBV risk mitigation** and IYCF-E



# GNC Technical Alliance Technical Support Team

## IYCF-E quick remote support

**Main Countries:** Ukraine, DRC, Ethiopia, Kenya, Venezuela, Poland, Rwanda, Uganda

### Main Themes:

- Programming for non-breastfed infants
  - Protocols, RUIF calculations, procurement, constraints
- IYCF-E TWG
  - Set up, reactivating, ToRs, tools to assess the capacity
- Ebola
  - Guidance, BMS programming
- Breastfeeding guidance
  - Counselling, Baby Spaces, Corners
- BMS Code
  - Infographics, powdered milk distribution, food baskets
- Complementary feeding
  - Guidance, costing
- Application of the Operational Guidance



# GNC Technical Alliance TST focus and priorities

## Gender and NiE commitments

- Gender and GBV Workstream with TST and subject matter experts from UN and NGOs
- Training on Gender and GBV Risk mitigation (GBVRM) to all TST staff
- Gender and GBVRM ToR review for all deployments
- Joint Gender and GBVRM mission in planning with TST and UNICEF

## Anti-racism and Localisation

- Anti-racism and Localisation Workstream with specific actions and commitments
- Anti-racism training for all of the TST, including coordination teams
- Focus on support to local and national orgs with specific focus on Women Led Orgs (WLO) and Women Rights Orgs (WRO)
- Local org requests
  - 2021: 16
  - 2022: 35

## Current and Forecasted Needs

- Outreach to 20 country cluster coordination teams to map support needs for Q4 2022 and into 2023 in response to the global food crisis
- IDS on IYCF-E was requested by a number of countries (Nigeria, Sudan, Somalia, Mali, NW Syria, Mozambique)
- Requests for support covering:
  - Situational analysis
  - Organisational and sector-wide IYCF-E capacity assessment
  - Operational and programmatic guidance development, definition of minimum packages, strategy & action plan development
  - Associated capacity strengthening, monitoring uptake of guidance
  - IYCF-E TWG reactivation/support, TWG action plan development
  - Development of IYCF-E M&E frameworks
  - Integration of IYCF-E into other sectors
  - Piloting of MAMI Care Pathway
  - Gender & GBV risk mitigation mainstreaming into MIYCN-E programming

# Gaps, challenges, priorities, enablers

Gaps, challenges and issues identified; experiences and lessons learned documented and brought to the IFE Core Group and other stakeholders for action and support

## Identification of Themes

- Have we missed any critical issue? or activity?
- What are future opportunities/priorities?

Your thoughts on Jamboard

[https://www.ennonline.net/attachments/4904/IFE-Core-Group-Annual-Meeting-2022\\_Jamboard.pdf](https://www.ennonline.net/attachments/4904/IFE-Core-Group-Annual-Meeting-2022_Jamboard.pdf)

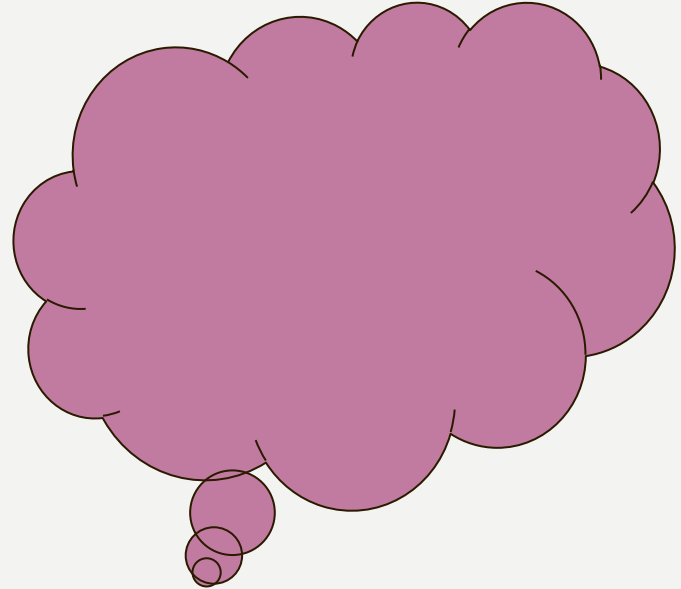
# Round-table discussion

## Identification of Themes

- Have we missed any critical issue? or activity?
- What are future opportunities/priorities?



# This or That



IFE Core Group [members updates!](#)

*Link to Gallery*

10 minutes

# Reflections from Day 1 pm

- Many **outputs** that respond to identified needs under the IFE Core Group to **celebrate**
  - Where do they go from here? As individual agencies and as a collective? And how do we know they are useful and used widely?
  
- Emphasis and topics for work are influenced by the **landscape of emergencies**
  - Alignment with needs (e.g. GNC TST requests), and triangulation of needs across challenge and activities (relactation guidance)
  
- **Channels** for identifying needs and challenges are dynamic
  - What might optimize channeling the information from those channels into action?
  
- What will we use to **prioritize among the priorities**? In particular where some agencies have limited bandwidth?
  - Would it be helpful to define headline priorities for the IFE Core Group for 2023?

## Wrap up and closing of Day 1

Mad, Sad, Glad - over on Jamboard



Mad



Sad



Glad

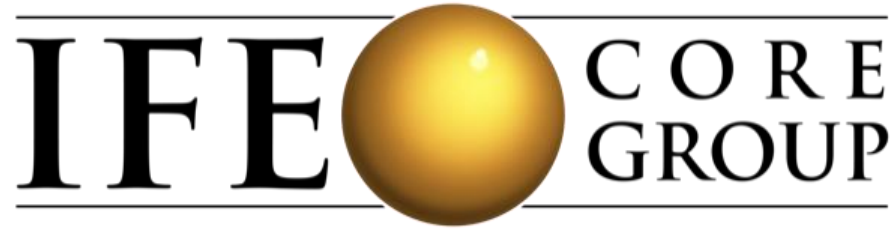
## **Wrap up and closing of Day 1**

**Thank you!**

**See you tomorrow.**

# Reflections from Day 1

- Many outputs that respond to identified needs under the IFE Core Group to celebrate
  - Where do they go from here? And how do we know they are useful and used widely?
  
- Emphasis and topics for work are influenced by the landscape of emergencies
  - “Courageous action” needed alongside incremental progress towards workplan commitments
  
- Channels for identifying needs and challenges are dynamic
  - What might optimize channeling the information from those channels into action?
  
- What will we use to prioritize among the priorities? In particular where some agencies have limited bandwidth?
  - Would it be helpful to define headline priorities for the IFE Core Group for 2023?



# Annual meeting 2022

Day 2 - October 25

## Welcome and recap of day 1

### Day 1:

- 10 Years of Progress
- Update on IFE Core Group achievements for 2022
- Presenting gaps, challenges, enablers and priorities using a list of identified channels → identification of themes → see jamboard



## DETAILED AGENDA DAY 2

TUES OCT 25

10 AM – 1 PM UK TIME

2 PM – 5 PM UK TIME

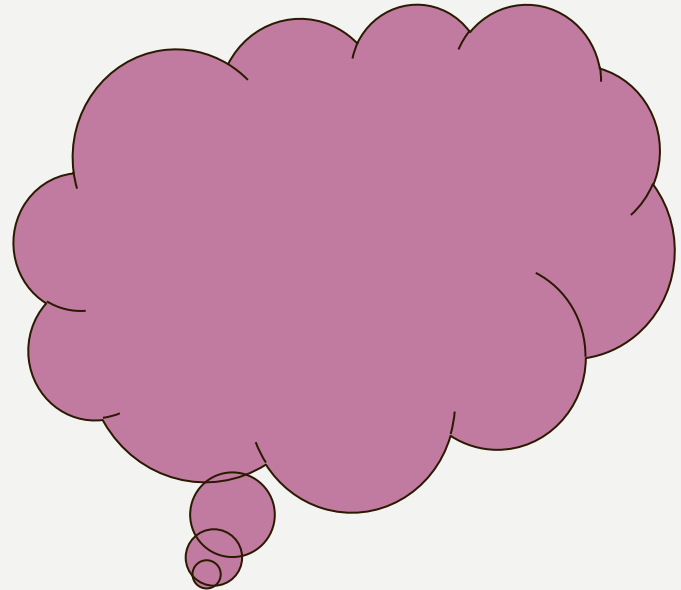
10am   2 pm	<b>Welcome, Registration and Recap of Day</b>	(10 min)
10:10   2:10	<b>IFE Core Group Member Updates</b>	(10 min)
10:20   2:20	<b>IFE Core Group Outputs division to breakout rooms</b>	(15 min)
10:35   2:35	<b>Breakout Rooms – 2023 Planning</b> <i>(includes 10 min break)</i>	(105min)
12:20   4:20	<b>IFE Core Group Member Updates</b>	(10 min)
12:30   4:30	<b>Plenary Discussion: priorities and activities</b> <b>Wrap up and closing of the day</b>	(30 min)
1:00   5:00	<b>END</b>	

IFE Core Group [members updates!](#)

[Link to Gallery](#)

10 minutes

# This or That



# Breakout groups - 1hr 30 minutes

**Objective** is to identify priority **activities** for 2023 to be delivered under the IFE Core Group action plan → prepare a slide or two on the list of suggested activities to present on Thursday

## Suggested process:

- Review suggested activities from 2021-2023 action plan (pasted on Jamboard and found [here](#))
- Review themes / priorities / gaps from two sources
- Discuss suggested activities:
  - Keep?
  - Modify?
  - Suggest new ones?
- PM session: review AM session and complete process

## Considerations while making a decision on activities

- Priority/urgency
- Alignment with IFE Core Group strategy
- Feasibility
- Resources needed / capacity available based on 2022 experience
- **NEW NEW NEW - (Input for Output C)**
  - Who do we want to tell, and what do we need to tell them
  - What channels might we use (events/conferences)
  - What needs to be advocated, to whom

**Working groups/breakout rooms:**

**Room 1 → Discussion of activities under Output 1 Gaps, challenge, issues, enablers identified; experiences and lessons learned documented and brought to the IFE Core Group and other stakeholders for action and support**

**Room 2 → Discussion of activities under Output 2 Part 1**


**Room 3 → Discussion of activities under Output 2 Part 2**

**(Output 3 i incorporated into discussions about Output 1 and 2**

**Output 4 is addressed on day three)**

A

**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Track issues and challenges related to active emergencies and bring to the Community of Practice for action and support



Identify gaps in knowledge and practice; potential areas of research and identify ways of addressing gaps




Document evidence, experiences and lessons learned including uptake of IYF-E OG and other technical support


A

# Room 1

**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Track issues and challenges related to active emergencies and bring to the Community of Practice for action and support



Activate and maintain the protocol/roadmap for tracking issues and challenges related to IYCF-E and report on them.\*

\* IFE Core Group monthly meeting agendas support reporting on challenges related to active emergencies using inputs from some channels, and leading to **action and support activities**

A

# Room 1


**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Identify gaps in knowledge and practice; potential areas of research and identify ways of addressing gaps



Research priorities in IYCF-E: **conduct a "Stock Taking" on IYCF-E research.**






Review of literature: **Build a system** to track new research / findings related to IYCF-E from both **peer reviewed literature** and grey literature. **Develop repository that can be sustained** to track issues and challenges related to IYCF-E.



**Output A:** GAPS, CHALLENGES AND ISSUES IDENTIFIED; EXPERIENCES AND LESSONS LEARNED DOCUMENTED AND BROUGHT TO THE IFE CORE GROUP AND OTHER STAKEHOLDERS FOR ACTION AND SUPPORT



Document evidence, experiences and lessons learned including uptake of IYFE OG and other technical support

- 
- Develop a report on implementation of IYCF-E policies and plans by countries and governments.
- 
- Develop communications plan and derivative products for A.3.1 report to support advocacy efforts
- 
- Maintain mapping of IFE-OG dissemination on IFE-CG website

**B**

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

**Develop and disseminate written guidance**

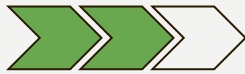
**Identify opportunities to input into 3rd party processes, and provide support as needed**

**Provide technical support through En-net and other online platforms**

**Respond to technical needs as identified and shared through Global Nutrition Cluster Technical Alliance and following the established protocol**

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

### Develop and disseminate written guidance



Facilitate and encourage **translation** of the IYCF-E OG and other materials by a variety of means



Develop new material that help operationalise the IYCF-E OG



- Continue developing **infographics**



- Develop **new guidance or update existing guidance** based on current gaps identified: **FAQs, wet nursing and re-lactation in emergencies**



- Develop a **draft template of good practice operational guidance** that can then be set to develop national guidelines



- Develop **glossary** to standardise core terminology such as breastfeeding/ lactation; IYCF/ MIYCN, more inclusive language.

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats



Develop and update training materials based on the IYCF-E OG



Update the newly released [IYCF Counselling: an integrated course](#) with [additional modules](#) that could be used in [emergency contexts](#).



Identify opportunities to [integrate MAMI Care Pathway](#) into OG-related tools and training materials.



Develop an [e-learning course](#) on IYCF and [infectious diseases](#)



Maintain the availability of an up-to-date IYCF-E resources and material database



Organise a series of internal and external webinars that respond to gaps and challenges

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats



Conduct [Case Studies](#) on [Complementary Feeding in Emergencies](#)



Develop [CFE guidance for country implementation](#) based on the [CFE Case studies](#)



[Field Exchange](#) publications on [CFE](#)

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

Identify opportunities to input into 3rd party processes, and provide support as needed



Ongoing

Review tools/guidance produced by IFE Core Group members Support updating of IYCF indicators and assessment tools as appropriate and encourage quality assessments integrating IYCF indicators where possible.

Provide technical support through En-net and other platforms



Ongoing

Members to provide support on en-net and other online platforms.

**Output B:** Resource materials to support feeding and care of children in humanitarian settings developed and provided in appropriate and accessible formats

**Respond to technical needs as identified and shared through Global Nutrition Cluster Technical Alliance and following the established protocol.**



Ongoing

Regularly engage and respond to GNC-TA as the Global Thematic Working Group on IYCF-E.

Examples:

- Support for Poland question on Code and European follow-on formula
- Cash Voucher Guidance discrepancy

Extraordinary - [Ukraine](#)

# Recommendations for governments

1. Fulfill their commitments under WHA Resolution 62.23
2. Strengthen emergency response by addressing governance and capacity gaps between nutrition and disaster management structures and between cluster and sectoral coordination platforms.
3. Invest in raising awareness, training, and institutionalizing IYCF-E capacity
4. Promote and fund IYCF-E interventions described in the OG-IFE
5. Close data gaps by investing in routine data systems and capacity for data-driven action
6. Continue to invest in the implementation of the *International Code of Marketing of Breastmilk Substitutes* and subsequent WHA Resolutions (referred to hereafter as “the Code”), including monitoring Code violations, and adopt legislation to prevent BMS donations in emergencies.



# Recommendations for humanitarian and development communities

1. Develop and deliver policy advocacy agenda to promote the uptake of actions outlined in the OG-IFE.
2. Define individual agency commitments to IYCF-E and ensure that respective agency policies, processes, competencies, capacity development and resources reflect these commitments.
3. Revise humanitarian and development guidance documents and define inter-cluster commitments to support multi-sectoral collaboration for IYCF-E.
4. Support the sharing of research and lessons learned to improve IYCF-E programming.
5. Support the development of robust country-level nutrition information systems and capacities.
6. Develop a complementary monitoring framework to support tracking progress at the county level in delivering on actions outlined in the OG-IFE.

IFE Core Group [members updates!](#)

[Link to Gallery](#)

10 minutes

# Working Group Discussion Plenary

5 minutes reflection from each group in plenary

# Final agenda (note activity order has changed)

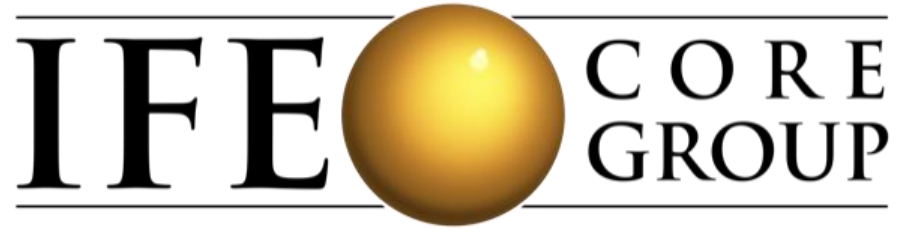
## DETAILED AGENDA DAY 3

THURS OCT 27 10AM – 1 PM UK TIME

10am   2 pm	<b>Welcome, Registration and Recap of Day 2</b>	(10 min)
10:10   2:10	<b>IFE Core Group Member Updates</b>	(10 min)
10:20   2:20	<b>Plenary Discussion: Our Ways of Working</b>	(60 min)
11:20   3:20	<b><i>Break</i></b>	(10 min)
11:30   3:20	<b>Completion of Day 2 exercise recommendations for 2023 activities</b>	(60 min)
12:30   4:30	<b>Plenary Discussion: summary of priority activities for afternoon presentation</b>	(25 min)
	<b>Wrap up and closing of the day</b>	(5 min)
1:00   5:00	<b>END</b>	

# AM - Continuation of Day 2 Exercise

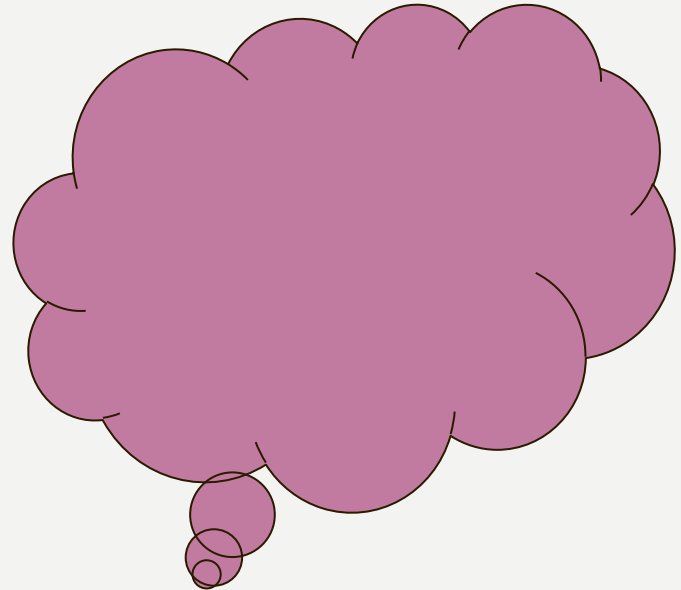
- Review of day 2 - Jamboard
- React and refine
- Slide presentation for this afternoon
  - 2023 workplan priorities



# Annual meeting 2022

Day 3 - October 27

# This or That



# Final agenda (note activity order has changed)

## DETAILED AGENDA DAY 3

THURS OCT 27

2 PM – 5 PM UK TIME

10am   2 pm	<b>Welcome, Registration and Recap of Day 2</b>	(10 min)
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11:20   3:20	<b><i>Break</i></b>	(10 min)
11:30   3:20	<b>Working Group Presentations (15 min ea)</b>	(60 min)
12:30   4:30	<b>Plenary Discussion: priorities and activities</b>	(25 min)
	<b>Wrap up and closing of the day</b>	(5 min)
1:00   5:00	<b>END</b>	



IFE Core Group [members updates!](#)

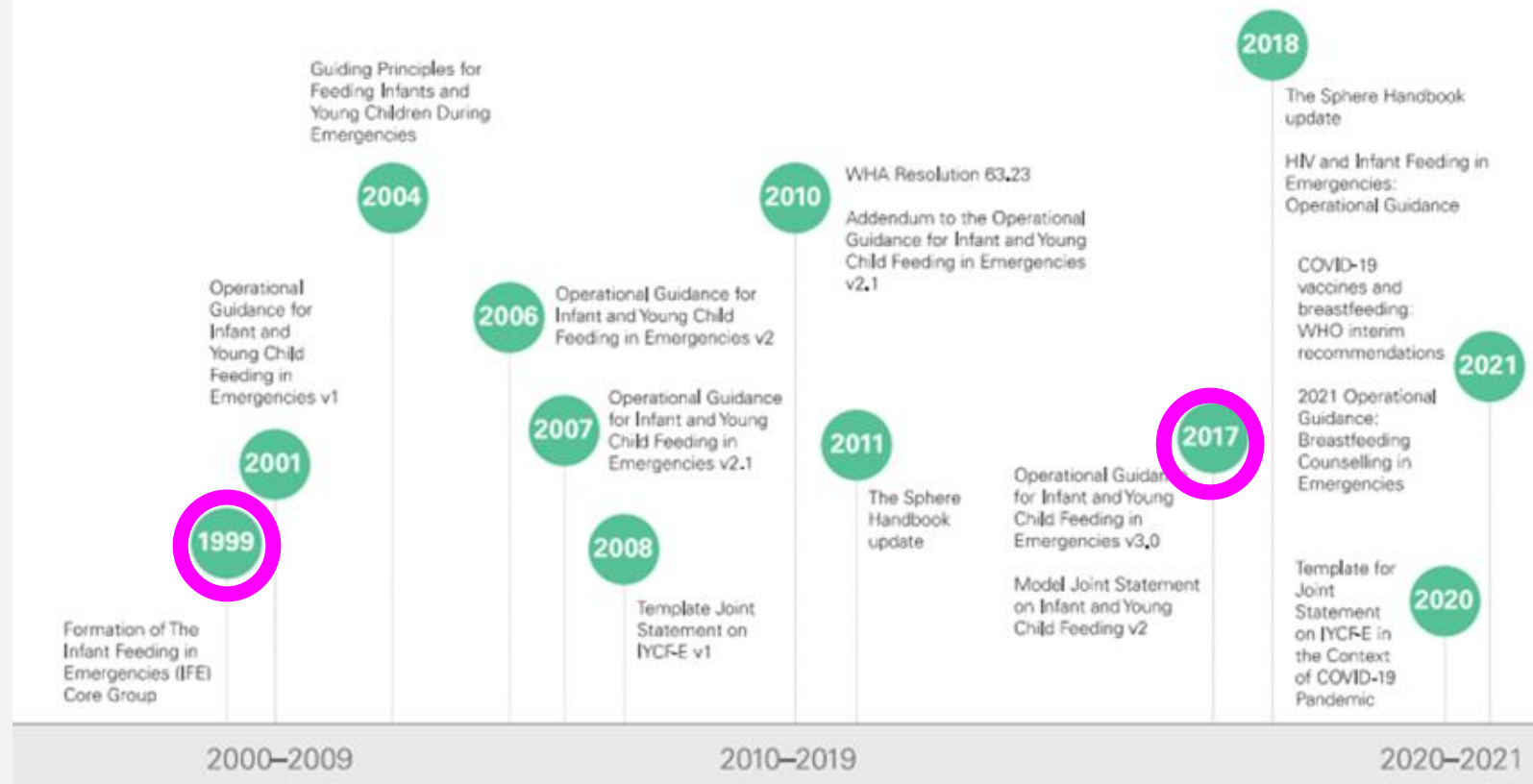
[Link to Gallery](#)

10 minutes

Plenary discussion

# **Our Ways of Working**

# Milestones: Foundations for IYCF-E



<p>Baby-Friendly Hospital Initiative International Code of Marketing of Breastmilk Substitutes Subsequent Code</p>	<p>Global Strategy for Infant and Young Child Feeding</p> <p>Guiding Principles:</p>	<p>Innocent Declaration on IYCF</p> <p>Guiding Principles: Feeding</p>	<p>Lancet Commission</p>	<p>Guidelines on HIV and Infant Feeding</p>	<p>Comprehensive Implementation Plan on Maternal, Infant and Young Child Nutrition</p> <p>Subsequent Code</p>		<p>Revised Baby-Friendly Hospital Initiative</p>	
						<b>2018</b>		



### Who we are:

- a global collaboration of agencies and individuals
- formed to address policy guidance and training resource gaps hampering programming on IYCF-E

### What we do:

- Do not directly implement programmes
- Develop guidance and resource materials;
- document lessons learned
- build capacity to ensure more effective IYCFE
- members bring challenges and issues to the collective membership for peer support and guidance to facilitate rapid application of up-to-date experience in operations and to connect on-the-ground experiences with the development of agency and global policy guidance.

# Output D



Keep IFE CG membership data base up-to-date and respond to new membership



Map the group's current composition, identify gaps, and strategize



Implement a plan for increasing engagement with local/national



Conduct regular monthly meetings



Conduct Annual meetings



Update information on the ENN website



Conduct regular meetings with GNC-TA and participate in other fora (CIF-WG, etc.)



Facilitate peer-to-peer support via online communication and regular meetings

# Output D



Keep IFE CG membership data base up-to-date and respond to new membership

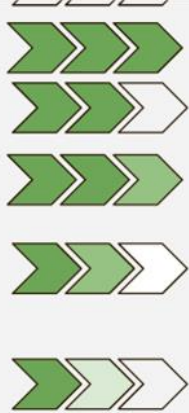
# Output D



Map the group's current composition, identify gaps, and strategize

Implement a plan for increasing engagement with local/national

# Output D



Conduct regular monthly meetings
Conduct Annual meetings
Update information on the ENN website
Conduct regular meetings with GNC-TA and participate in other fora (CIF-WG, etc.)
Facilitate peer-to-peer support via online communication and regular meetings



# Jamboard

How do you experience the IFE Core Group as a member?

- four stickies

1. this way of working works for me
2. this way of working doesn't work for me
3. here are two suggestions about our way of working that I feel will help me get more value out of my participation and contribution in the IFE Core Group

# 1-2-4 All

1. Start with everyone in the whole group for a minute to work in silence
2. Split the whole group into pairs using Zoom's breakroom feature for 2 minutes.
3. Merge two pairs into a group of four for five minutes and the group aggregates its findings, for example, on a Jamboard
4. Introduce each group's findings to the whole group by screen sharing in plenary

# 1-2-4 All

What's one incremental change in 2023 that we need to make, to power up the IFE Core Group to be effective with our guidance?

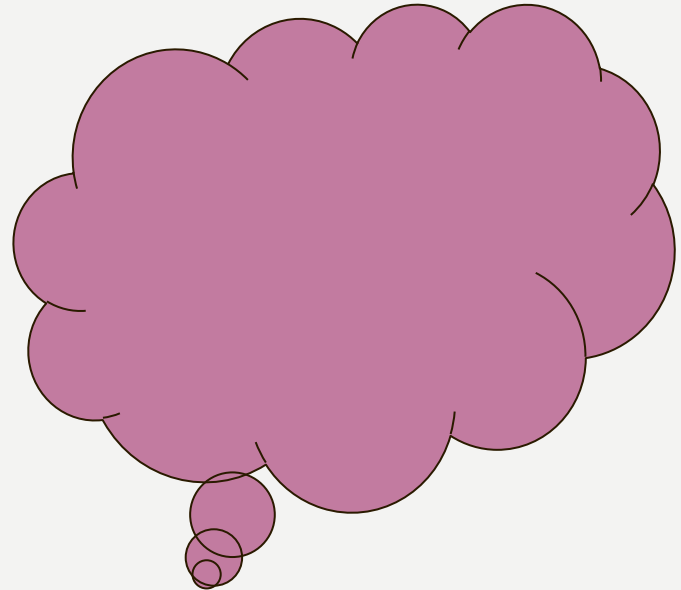
# Ways of Working - Plenary

Round-robin - does what you heard change how you answered this question?

Are you in agreement with what you heard?

What did we miss?

# This or That



# Presentations from breakout groups

# Plenary discussion

- React and refine

# Wrap and Closing