



**GLOBAL TECHNICAL ASSISTANCE MECHANISM FOR NUTRITION**

## **CORONAVIRUS DISEASE (COVID-19)**

Summary of Guidance for Nutrition in Emergencies Practitioners

VERSION 1.1 – 13 MARCH 2020

**About this brief :** This technical brief provides an overview of available guidance and tools on the Novel Coronavirus Disease (COVID-19) to assist Nutrition in Emergencies (NiE) practitioners in integrating COVID-19 preparedness and response into humanitarian nutrition responses. Given the rapidly evolving situation, this brief will be updated every 2 weeks until further notice. Visit [the GNC Website](#) to view the latest version.

<b>Key</b>
Summary of guidance listed
Capacity building resources
Considerations for application of guidance in emergency settings

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**PREPAREDNESS**

**Summary of guidance on COVID-19 preparedness:**  
 Actions to be taken include:

- ensuring comprehensive medical, **nutritional**, and psychosocial care for those with COVID-19

**NB: No specific guidance for the nutrition sector on COVID-19 preparedness has been identified by GTAM**

**World Health Organisation (WHO) COVID-19 Strategic Preparedness and Response Plan: Operational Planning Guidelines to Support Country Preparedness and Response (Published 12 Feb 2020)**  
[www.who.int/docs/default-source/coronaviruse/covid-19-sprp-unct-guidelines.pdf](http://www.who.int/docs/default-source/coronaviruse/covid-19-sprp-unct-guidelines.pdf)

A related online training has been developed to assist UN country teams in scaling up country preparedness and response. **Time to complete:** 2 hours  
<https://openwho.org/courses/UNCT-COVID19-preparedness-and-response-EN>



## HEALTH AND NUTRITION FACILITY AND SYSTEMS MANAGEMENT

WHO recommend facilities, including nutrition centres, to apply standard precautions (such as respiratory and hand hygiene measures) for all patients as well as implementing additional precautions (including contact and droplet precautions and airborne precautions for aerosol-generating procedures) for any cases where COVID-19 infection is suspected. Administrative controls and policies as well as environmental and engineering controls are also recommended for the prevention and control of transmission of the virus. As part of WHO's Occupational Health guidance, recommendations are available on the rational use of personal protective equipment (PPE) in healthcare and community settings in the context of COVID-19 in view of expected disruptions of the global supply chain of PPE.

### **Centres for Disease Control and Prevention (CDC) – Hospital Preparedness Assessment Tool (Reviewed 14 Feb 2020)**

Guidance (for [US Hospitals](#)) on areas for hospitals to review in preparation for potential arrivals of COVID-19 patients, including infection prevention control (IPC), rapid identification and isolation etc.

[www.cdc.gov/coronavirus/2019-ncov/hcp/hcp-hospital-checklist.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/hcp-hospital-checklist.html)

### **WHO. IPC during health care when COVID-19 infection is suspected (Published 25 Jan 2020)**

Includes standard precautions for facilities to take with all patients (e.g. those attending health and nutrition facilities for treatment of malnutrition) [www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-\(ncov\)-infection-is-suspected-20200125](http://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-(ncov)-infection-is-suspected-20200125)

### **WHO IPC Course for COVID-19**

Online training for healthcare workers and public health professionals on what facilities should be doing to be prepared to respond to a case of an emerging respiratory virus such as the novel coronavirus, how to identify a case once it occurs, and how to properly implement IPC measures to ensure there is no further transmission to Healthcare Workers (HCW) or to other patients and others in the healthcare facility. **Time to complete:** 1 hour

<https://openwho.org/courses/COVID-19-IPC-EN>

### **WHO Resource Page on COVID-19 Occupational Health (Multiple Resources)**

Includes guidance rights, roles and responsibilities of health workers, health workers exposure risk assessment and management, rational use of PPE and a risk communication package.

[www.who.int/news-room/detail/09-03-2020-covid-19-occupational-health](http://www.who.int/news-room/detail/09-03-2020-covid-19-occupational-health)

## MANAGEMENT OF WASTING

During an influenza pandemic, malnutrition may increase. To prevent malnutrition, key family practices and treatment of common illnesses should be encouraged and the health and food security sectors should be closely linked. Programmes may need to be adjusted (e.g. avoid mass gatherings, separate patients, temporarily stop or decrease frequency of follow-up visits at health facilities etc.) Existing CMAM programmes should be supported to continue if possible, however new CMAM programmes are not recommended during an influenza pandemic. Supplementary feeding programmes should continue if possible (NB: COVID-19 specific guidance is available on mass gatherings). Inpatient therapeutic feeding programmes should continue if possible, with separate isolation areas for patients with suspected influenza.

→ Refer to [Health and Nutrition Facility and System Management](#) regarding measures to be taken in acute malnutrition treatment facilities.

**NB: No guidance has been identified by GTAM on management of wasting in the context of COVID-19**

### WHO. Key planning recommendations for mass gatherings in the context of the current COVID-19 outbreak (Interim Guidance)

For consideration for nutrition programmes conducting mass gatherings (e.g. during distributions organised by supplementary feeding programmes) <https://web-prod.who.int/publications-detail/key-planning-recommendations-for-mass-gatherings-in-the-context-of-the-current-covid-19-outbreak>

### WHO. Reducing excess mortality from common illnesses during an influenza pandemic (2008)

Guideline which provides strategies for prevention and treatment, at the community and household levels, of the most likely contributors to mortality from common illnesses during an influenza pandemic and recommendations to support a minimum level of continuity for priority public health programmes during a pandemic. Covers [acute malnutrition programmes](#) (p. 24)

[www.who.int/diseasecontrol/emergencies/common\\_illnesses2008\\_6.pdf](http://www.who.int/diseasecontrol/emergencies/common_illnesses2008_6.pdf)

## NUTRITIONAL SUPPORT FOR COVID-19 PATIENTS

**NB: No guidance has been identified by GTAM on nutritional support for patients with COVID-19**

**NB:** Breastfed children of patients who are too unwell to breastfeed or who have died may require replacement feeding with a nutritionally adequate diet (e.g. with donor human milk, through wet nursing<sup>1</sup> or with a breastmilk substitute (BMS)). Note that there is currently no specific recommendation on the safety of wet nursing in the context of novel coronavirus disease. The [Operational Guidance on Infant and Young Child Feeding in Emergencies \(IFE\)](#) section 6.2 instructs to “establish clear eligibility for BMS use in agreement with the IFE coordination authority. If criteria are already in place, review and revise as needed. Communicate these criteria to caregivers, communities and emergency responders.”

## INFANT AND YOUNG CHILD FEEDING

CDC, UNICEF and WHO as well as other agencies have all issued statements about coronavirus and breastfeeding. Based on the known benefits of breastfeeding and [limited evidence](#) that the COVID-19 virus is not present in breastmilk, they all advocate **continuing to breastfeed** (regardless of COVID-19 status).

The main risk of transmission between a caregiver and their child is through close contact (respiratory air droplets). For caregivers with suspected or confirmed COVID-19 infection, [precautions to prevent transmission](#) (such as frequent handwashing) are recommended if feeding infants and young children.

<sup>1</sup> Also known as allomaternal nursing, breastfeeding of a child by someone other than the child’s biological mother.

UNFPA recommends that breastfeeding women should not be separated from their newborns. WHO further specifies that breastfeeding mothers with suspected COVID-19 infection and their infants are an exception to the recommendation to maintain a distance of 1 metre. This is complemented by guidance from CDC, UNFPA and UNICEF that breastfeeding mothers with suspected or confirmed COVID-19 infection can consider asking someone who is well to feed the infant (e.g. with expressed breastmilk from a spoon/cup)

To read the full text of resources listed below (and others), see Safely Fed Canada's **compilation of COVID-19 resources and statements related to breastfeeding**: <http://safelyfed.ca/covid19-resources/>

→ Go to [nutritional support](#) for guidance on replacement feeding for infants of COVID-19 patients.

**NB: Very limited guidance has been identified by GTAM for artificial feeding in the context of COVID-19  
No specific guidance has been identified by GTAM on complementary feeding in the context of COVID-19**

**CDC. Interim Guidance on Breastfeeding for a Mother Confirmed or Under Investigation For COVID-19 (Published 19 Feb 2020)**

Interim guidance for women with suspected or confirmed COVID-19 infection who are breastfeeding (directly at the breast or expressing). Covers shared decision making (between HCWs and mothers) and recommended precautions to prevent transmission to a breastfed infant.

[www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnancy-guidance-breastfeeding.html](http://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnancy-guidance-breastfeeding.html)

**Royal College of Obstetricians and Gynaecologists (RCOG). COVID-19 Infection in Pregnancy. Information for healthcare professionals. Version 1. (Published 9 March 2020)**

Resource for United Kingdom HCWs. Includes advice to share with pregnant women, advice for services caring for women with and recovering from COVID-19. Section 3.8.2 (p. 22) on infant feeding covers shared decision making and precautions caregivers with suspected or confirmed COVID-19 infection should take to prevent transmission when feeding their infant (covers both breastfeeding and formula feeding).

[www.rcog.org.uk/globalassets/documents/guidelines/coronavirus-covid-19-virus-infection-in-pregnancy-2020-03-09.pdf](http://www.rcog.org.uk/globalassets/documents/guidelines/coronavirus-covid-19-virus-infection-in-pregnancy-2020-03-09.pdf)

**United Nations Population Fund (UNFPA) Statement on COVID-19 and pregnancy (Published 5 March 2020)**

Synthesis of evidence on risks for pregnant women as well as preventive measures and supportive therapies recommended. Includes guidance for symptomatic women who are breastfeeding, including recommended precautions to prevent transmission to their infant. [www.unfpa.org/press/unfpa-statement-novel-coronavirus-covid-19-and-pregnancy](http://www.unfpa.org/press/unfpa-statement-novel-coronavirus-covid-19-and-pregnancy)

**UNICEF. COVID-19: What Parents Should Know. (Accessed 13 March 2020)**

General information for parents, including precautions families can take to avoid infection and guidance for symptomatic women who are breastfeeding, including recommended precautions to prevent transmission to an infant. [www.unicef.org/stories/novel-coronavirus-outbreak-what-parents-should-know](http://www.unicef.org/stories/novel-coronavirus-outbreak-what-parents-should-know)

**WHO. Home care for patients with suspected COVID-19 infection presenting with mild symptoms and management of contacts. (Published 4 February 2020)**



[www.who.int/publications-detail/home-care-for-patients-with-suspected-novel-coronavirus-\(ncov\)-infection-presenting-with-mild-symptoms-and-management-of-contacts](http://www.who.int/publications-detail/home-care-for-patients-with-suspected-novel-coronavirus-(ncov)-infection-presenting-with-mild-symptoms-and-management-of-contacts)

With regard to feeding children expressed breastmilk: as per the [Operational Guidance on Infant and Young Child Feeding in Emergencies](#) (OG-IFE) Sections 5.9 and 6.23 “the use of ...**breast pumps** should only be considered when their use is vital and where it is possible to clean them adequately, such as in a clinical setting” and “discourage use of **feeding bottles and teats** due to high risk of contamination and difficulty with cleaning. Support use of cups (without spouts) from birth.”

General guidance on IYCF in the context of Infectious Disease Outbreaks can be found in Section 5.40: “Anticipate and assess the impact of human and animal infectious disease outbreaks on IYCF, such as interrupted access to health and feeding support services; deterioration in household food security and livelihoods, transmission risks via breastfeeding; and maternal illness and death. Take actions to mitigate risks. Interim guidance may be necessary to address unanticipated IYCF consequences in outbreaks. Consult WHO for up to date advice.” [www.enonline.net/operationalguidance-v3-2017](http://www.enonline.net/operationalguidance-v3-2017) (available in multiple languages)

## **WORKPLACE PRECAUTIONS**

### **WHO. Getting your workplace ready for COVID-19. (Published 3 March 2020)**

Describes precautions to take to prevent the spread of COVID-19 in the workplace, including during meetings. [www.who.int/docs/default-source/coronaviruse/getting-workplace-ready-for-covid-19.pdf](http://www.who.int/docs/default-source/coronaviruse/getting-workplace-ready-for-covid-19.pdf)

## **RESEARCH**

### **Elsevier’s Novel Coronavirus Information Centre**

Compilation of expert guidance, clinical information and research for the research and health community. [www.elsevier.com/connect/coronavirus-information-center](http://www.elsevier.com/connect/coronavirus-information-center)

### **Lancet COVID-19 Resource Centre**

Compilation of COVID-19 content from across The Lancet journals as it is published. [www.thelancet.com/coronavirus](http://www.thelancet.com/coronavirus)

## **COVID-19 GENERAL RESOURCES**

### **Disaster Ready: Coronavirus Disease (COVID-19) Resources**

Collection of learning resources for healthcare workers and public health professionals (log-in necessary) <https://www.disasterready.org/>

### **Core Group COVID-19 Global Response Coordination**

<https://coregroup.org/resources/2019-novel-coronavirus-global-response-coordination/>

### **Johns Hopkins – Global Mapping**

Global mapping of cases, updated daily.

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

### **MedBox**



Compilation of Context & Facts, Situation Reports & Updates, Clinical Guidelines and Prevention & Control  
<https://www.medbox.org/toolbox/114M2DGK>

### Sphere Standards for the Coronavirus Response

4 page guidance document on relevant parts of the Sphere Handbook  
<https://spherestandards.org/resources/coronavirus/>

### WHO Novel Coronavirus Information Landing Page

Information and guidance from WHO, including sitreps, technical guidance and training.  
[www.who.int/emergencies/diseases/novel-coronavirus-2019](http://www.who.int/emergencies/diseases/novel-coronavirus-2019)

**This document will be updated on a regular basis. If you would like to suggest additional areas for this guidance to cover, or to submit new tools or guidance for consideration, please email [gtam@enonline.net](mailto:gtam@enonline.net)**

**About the Global Technical Assistance Mechanism (GTAM)** GTAM is a common global mechanism endorsed by over 40 Global Nutrition Cluster (GNC) partners to provide systematic, predictable, timely and coordinated nutrition technical assistance in order to meet the nutrition rights and needs of people affected by emergencies. The GTAM is co-led by UNICEF and World Vision International (WVI) in collaboration with a core team (GTAM-CT) comprising of the Emergency Nutrition Network (ENN) as the Knowledge Management (KM) partner as well as the Global Nutrition Cluster (GNC) and the Technical Rapid Response Team (Tech RRT). When country and regional capacities are exhausted, unresolved technical issues can be escalated to the GTAM. Depending on the issue, the GTAM will provide **technical advice**, facilitate the development of **consensus-driven guidance** (through Global Thematic Working Groups and normative agencies such as WHO) and provide specialized **technical expertise**. Wherever possible and appropriate, the GTAM seeks to leverage existing technical support mechanisms. For further information about the GTAM, visit: <http://nutritioncluster.net/resources/global-technical-assistance-mechanism-nutrition/>

