Nutritional Guidelines for Women of Reproductive Age (WRA) and IYCF Strategy 2030

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INTRODUCTION

- Developed with financial and technical assistance from our development partners: Nutrition International and UNICEF and based on global and local guidance and evidences
- Guided by inputs from **multi-sector stakeholders**:
 - Technical experts and representatives of professional organizations and the academe
 - National program managers and policy makers
 - Implementers across different levels of the system
 - Grassroot recipients of services



RATIONALE

(DM No.2020-0092) Interim Nutritional Guidelines for Women of Reproductive Age (WRA)

- Adolescents and Women of Reproductive Age especially the pregnant and lactating women are among those vulnerable to all forms of malnutrition
- The National Nutrition Surveys revealed that stunting among 0-5 months old is already on the range of 10-12% indicating intra-uterine growth restriction (IGR)
- Republic Act 11148 or Kalusugan at Nutrisyon ng Mag-Nanay Act, mandates the provision of life-saving nutrition interventions focused on the first 1,000 days of life to break the inter-generational cycle of malnutrition
- This guidelines complements Administrative Order No. 2016-0035
 "Guidelines on the Provision of Quality Antenatal Care in all Birthing Centers and Health Facilities Providing Maternity Care Services"
- This is an Interim Guidelines because there is no available global guidelines yet and the Philippines is one of the two countries in the East Asia Pacific Region to issue such guidelines



General Objective

To provide evidence-based guidelines on the assessment, identification and management of all forms of malnutrition among women of reproductive age (WRA) targeting three population groups: adolescent females and adult women before pregnancy (preconception stage); adolescent females and adult women during pregnancy; and postpartum, lactating women and adolescent females, and in between pregnancies.

Scope and Coverage

Centers for Health Development and other DOH concerned offices involved in the provision of technical assistance for the design and implementation of nutrition programs for pregnant and lactating adolescent females and adult women, and non-pregnant and non-lactating adolescent females and other women of reproductive age.



Specific Guidelines for Non-Pregnant, Non-Lactating Adolescents and Adult Women

ONE:

Assess Nutritional Status Using BMI for Girls 5-19 years old and adults following WHO Growth Standards and Cut-Offs TWO: Ask to determine history of heavy menstruation, night blindness, palpitations, fatigue, weakness, weight gain, etc. THREE: Assess for clinical signs of micronutrient deficiencies i.e. pallor, xeropthalmia, goiter FOUR: Provide nutrition counseling for normal clients and individualized counseling for underweight, overweight, hypertensive and diabetic patients FIVE: Provide appropriate micronutrient supplements particularly the Weekly Iron and Folic Acid (WIFA) based on National Guidelines

SIX:

Promote use of fortified foods especially iodized salt to prevent lodine Deficiency Disorders



Pregnant Adolescents and Adult Women

Assess Nutritional Status Using BMI fo

ONE:

Status Using BMI for Pregnant using WHO Cut-Offs for First Trimester or MUAC or Gestational Weight Gain TWO: Screen for CBC, particularly anemia and make follow up screening after a month THREE: Screen for gestational diabetes using appropriate laboratory tests FOUR: Assess Dietary Intake of Pregnant Women and provide individualized counseling if underweight, overweight or with gestational diabetes

FIVE: Provide appropriate micronutrient supplements i.e. Iron and Folic Acid, MMS, Iodized Oil Capsule and Calcium Carbonate based on National Guidelines

SIX:

Provide RUSF for Moms or Refer to Existing Dietary Supplementation Program for Pregnant Adolescent and Nutritionally-atrisk Pregnant Women



Lactating Adolescents and Adult Women

ONE:

Assess Nutritional Status Using BMI for Girls 5-19 years old and adults following WHO Growth Standards and Cut-Offs

TWO:

Assess food intake to determine Chronically Energy Deficient Lactating Women THREE: Assess underlying causes of undernutrition i.e. parasitism, tuberculosis and neoplasms

FOUR:

Provide individualized counseling if underweight or overweight, hypertensive and diabetic

FIVE:

Provide appropriate micronutrient supplements i.e. Iron and Folic Acid, MMS, and Postpartum Vitamin A capsule based on National Guidelines

SIX: Provide RUSF for Moms or Refer to Existing Dietary Supplementation Program for Chronically Energy Deficient Women









The National Infant and Young Child Feeding (IYCF) Strategic Plan 2019 to 2030



INTRODUCTION

Direction Towards IYCF 2030

Whole of society approach.

Accountability and shared responsibility. Equitable, gender-sensitive, rights-based, and evidenceinformed interventions. Strong and resilient health systems delivering essential IYCF services.

Integration of care through the life-stage approach.

Strategic Plan of Action

Mission and Vision



well-fed, nurtured children and healthy mothers • breastfeeding as a social norm • competent and dignified health workers • enabling health systems, communities and workplaces • whole of society working together, accountable to make this vision happen

Focusing on the First 1000 days, stakeholders of the Philippine IYCF Program shall set out to

- nurture and nourish the mother and child;
- 2) reduce stunting and all other forms of malnutrition; and

 create an enabling environment for optimal infant and young child feeding. MISSION IYCF 2030

VALUES & FOCUS AREAS IYCF 2030



Focus Area 1: Harmonized stakeholder action

- Harmonize existing nutrition-specific policies and initiatives related to IYCF
- Establish a coordinating body for the implementation and monitoring of IYCF 2030PH
- Draft the implementation plan for IYCF 2030 reflecting national and local harmonization updates and IYCF 2030 Milestones
- Install monitoring and reporting mechanisms for IYCF 2030
- Strengthen linkages of IYCF with nutrition-sensitive programs at the national and local level

Focus Area 2: Solid Communication Strategy

- Establish accessible communication platforms for IYCF2030
- Develop a harmonized IYCF 2030 communication strategy for target populations
- Actively engage key influencers with track record of integrity as volunteers for the IYCF 2030 movement
- Orient local government units on IYCF-related policies

Focus Area 3: Responsive Knowledge Management and Evidence Generation

- Create the IYCF2030 Dashboard to centralize access to data and resources
- Improve routine data collection and access
- Strengthen evidence generation and translation

Focus Area 4: Enabling Policies and Legislation

- Develop sustainable financing policies for IYCF at the LGU
- Strengthen EO 51 implementation, monitoring, and evaluation
- Enact a national legislation that will increase duration of paid maternity leave
- Establish legislative agenda on the Regulation of Inappropriate Marketing for Food and Beverage for Mothers, Infants and Young Children

Focus Area 5: Mother Baby Friendly Communities, Workplaces and Schools

- Mainstream IYCF support groups in program implementation
- Establish mother-baby friendly workplaces across the country, including informal workplaces
- Establish mother-baby friendly community settings across the country
- Implement mother-baby friendly disaster response
- Establish social norms by integrating IYCF key messages in the K-12 curriculum

Focus Area 6: Strong and Resilient Health Systems for IYCF Service Delivery

- Mainstream IYCF support groups in program implementation
- Strengthen the implementation of the mother-baby friendly initiative (MBFHI) in health facilities
- Map IYCF human resources/platforms service delivery
- Establish IYCF referral networks
- Strengthen the integration of IYCF in existing health services



FOCUS AREA 1

IYCF 2030 Strategic Plan of Action

Thank you



