

Summary report on the
**Meeting on nutrition
in emergencies in the
Eastern Mediterranean
Region**

Amman, Jordan
20–21 November 2023



**World Health
Organization**

Eastern Mediterranean Region

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1. Introduction

A meeting on nutrition in emergencies in the World Health Organization (WHO) Eastern Mediterranean Region was held in Amman, Jordan, on 20–21 November 2023.

The main objectives of the meeting were to:

- raise awareness and promote understanding among Member States of the available guidance, tools and resources to support nutrition in different types of emergency contexts;
- exchange country experience on protecting and promoting nutrition in emergency contexts and share lessons from this experience; and
- identify country support needs from WHO and/or other partners, and opportunities for country collaboration for mutual support.

Meeting participants included representatives with responsibility for nutrition from Afghanistan, Djibouti, Iraq, Jordan, Lebanon, Pakistan, Somalia, Sudan, the Syrian Arab Republic and Yemen, in addition to staff from the United Nations Children’s Fund (UNICEF), United Nations High Commissioner for Refugees (UNHCR), United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) and WHO.

2. Summary of discussions

Regional nutrition strategies and policies

Dr Ayoub Al-Jawaldeh, Regional Adviser for Nutrition, WHO Regional Office for the Eastern Mediterranean, provided an overview of the nutritional landscape, highlighting key programmes, strategies and policies in the Eastern Mediterranean Region, while Dr Najwa Al Dheeb, Nutrition Specialist, UNICEF headquarters, outlined UNICEF’s nutrition initiatives in emergency contexts. Dr Sameh Al-Awlaqi,

international nutrition consultant, then discussed Concern Worldwide's SURGE approach to strengthening local capacity to manage peaks in demand at health facilities. This was followed by Ms Dina Jardaneh, UNHCR Jordan, who described UNHCR's role in integrating nutrition within services in refugee camps in Jordan, while Dr Saverio Bellizzi, WHO Health Emergencies Team Lead, WHO Jordan, delineated WHO's interventions supporting emergency efforts in the country. Lastly, Ms Haya Khammash, UNRWA, presented UNRWA's nutrition response during the ongoing humanitarian crisis in the Gaza Strip.

WHO guideline on prevention and management of wasting and nutritional oedema in infants and children under 5 years

Dr Zita Weise Prinzo, Technical Officer, Food and Nutrition Action in Health Systems, WHO headquarters, presented an overview of the newly-released 2023 WHO guideline on the prevention and management of wasting and nutritional oedema (acute malnutrition) in infants and children under 5 years. The presentation outlined the approach taken to update the 2023 guidelines and discussed their implications for current programming to accelerate action on wasting. Dr Prinzo highlighted key changes in the guidelines, particularly the emphasis on prevention and the expansion of the age bracket from 6 months to 5 years, thus now encompassing infants from birth to 5 years. She stressed the importance of prioritizing infant and child feeding, especially for those under 6 months and 2 years, respectively, and highlighted shifts in the treatment approach towards outpatient care for both mothers and children. The need to adopt a multisectoral approach and ways to effectively implement the guideline in humanitarian contexts were also discussed.

Country presentations on WHO nutrition interventions during emergencies

Presentations were given on WHO nutrition interventions during emergencies in several countries of the Region. In discussion, the following common priorities emerged:

- **Enhancing health care skills:** All countries are striving to increase health care worker competencies, including through training in severe acute malnutrition, infant and young child feeding and nutrition surveillance.
- **Strengthening nutrition surveillance:** Most countries stressed the importance of strengthening or establishing nutrition surveillance systems, including malnutrition tracking and integrating the relevant indicators into existing health care frameworks.
- **Policy development:** Several countries advocated for policy refinement, including guidelines for malnutrition management, the integration of nutrition into emergency plans and regulating the marketing of breast-milk substitutes.
- **Integration into health care systems:** There was a consensus on the need for embedding nutrition interventions into existing health care structures such as through the integrated management of childhood illness (IMCI) and integrated management of acute malnutrition (IMAM), underlining the need for stakeholder collaboration.
- **Advocacy for funding:** Many countries emphasized the need for increased resources, promoting preventive measures, social inclusivity and poverty alleviation within the nutrition sphere.

Specific recommendations were made for each country:

- **Afghanistan:** Urgently address infant and young child feeding in emergency, specific training for nutrition managers and updating guidelines as per new WHO recommendations.
- **Djibouti:** Focus on delineating minimum activity packages for diverse health facility categories through a health care map,

developing multisectoral action plans and advocating for increased funding for nutrition activities.

- Lebanon: Disseminate guidelines and integrate nutrition into emergency preparedness plans.
- Pakistan: Prioritize contingency planning for crises and recognize the importance of public-private partnerships.
- Somalia: Enhance services in nutrition stabilization centres and integrate different nutrition services for a comprehensive approach.
- Syrian Arab Republic: Prepare for increased severe acute malnutrition cases, on-the-ground counselling and transition from action plans to strategic approaches.
- Sudan: Scale up services, support surveillance and capacity-building and advocate for increased support and surveillance promotion.
- Yemen: Enhance coordination among stakeholders, pre-position supplies and improve partnerships.

Food and nutrition surveillance systems

Dr Fekri Dureab, Technical Officer, Nutrition, WHO Regional Office for the Eastern Mediterranean, presented a review of national nutrition surveillance systems across the Region, focusing on their integration within existing health information systems, particularly in fragile settings. Dr Dureab noted that integration should aim for sustained and coordinated data collection and analysis, underscoring the need to establish a structural framework for surveillance systems. He observed that leveraging data from existing community surveys provided a pragmatic approach to increasing the comprehensiveness of nutrition surveillance. He also suggested adopting a stepwise approach that covers essential nutritional components and a minimal set of indicators, enabling a strategic expansion of surveillance capabilities in alignment with each country's specific needs and priorities.

Afghanistan, Sudan and Yemen shared their experiences, highlighting the importance of community nutrition data, but noting that implementing community sentinel surveillance may pose challenges in some countries.

Dr Elisa Maria Dominguez Muriel, Technical Officer, Monitoring and Surveillance, Nutrition and Food Safety, WHO headquarters, provided an overview of the WHO Anthro Survey Analyzer, highlighting its benefits for conducting surveys and assessments during emergencies.

Emergency preparedness and response

Dr Khalid El Tahir, Health Emergency Officer, WHO Regional Office for the Eastern Mediterranean, presented on emergency preparedness planning and response strategies, with a focus on scaling up life-saving treatment for acute malnutrition programmes, leveraging cost-effective interventions such as breastfeeding, complementary feeding and vitamin supplementation, and implementing preventive measures such as enhancing water supply and sanitation to avert disease outbreaks. The presentation emphasized the need to bolster the capacities of national institutions in nutrition emergency preparedness, response and mitigation, with a specific focus on children under-5, pregnant and lactating women, and vulnerable groups such as the elderly and people with disabilities. Dr Sophie Maes, Senior Emergency Officer, WHO headquarters, outlined the WHO Food Insecurity and Health Strategic Framework, while Dr Hicham El Berri, Medical Officer, Noncommunicable Disease Management, WHO Regional Office for the Eastern Mediterranean, discussed responding to noncommunicable diseases (NCDs) in emergency contexts.

In discussion, it was noted that experiences from the field underscored the importance of pre-empting malnutrition, providing critical treatment when prevention falls short and cultivating resilience within families and communities. The challenge of underfunding was highlighted, with

limited resources available for pre-emergency planning and strengthening systems, underlining the need for resource mobilization to strengthen nutritional resilience at both community and national levels.

Working group on the nutrition framework for emergency preparedness, response and recovery

In a working group, participants discussed essential nutrition interventions for emergency readiness, response and recovery. Adapting the draft nutrition emergency framework (see Annex) using the regional framework for action on addressing NCDs in emergencies was suggested. It was proposed that a task force be established to finalize the framework and oversee its implementation at country level.

3. Recommendations

To Member States

1. Incorporate disaster and emergency preparedness into the relevant policies and programmes.
2. Ensure that policies and actions during emergencies and humanitarian crises advocate, safeguard and endorse breastfeeding.
3. Equip health workers with the essential supplies and training needed to screen malnourished children and treat severe cases effectively within health facilities.
4. Formulate contingency and emergency preparedness plans for nutrition and food security, enabling an effective response and safeguarding the nutritional well-being of the population, particularly the most vulnerable, in any emergency situation.
5. Engage with and contribute to global networks for exchanging food safety information, especially on handling emergency situations.
6. Formulate a regional emergency taskforce on nutrition to strengthen and accelerate action for achieving the global nutrition targets.

4. The way forward

- Take advantage of the humanitarian–development–peace nexus (HDPN) and leverage existing frameworks for the integration of nutrition within broader service provision in areas such as immunization and child health.
- Establish nutrition programmes strategically in those countries grappling with the most significant burdens, such as Afghanistan, Djibouti, Iraq and Somalia.
- Exchange experiences and lessons learned among countries for the mutual benefits of programmes.
- Formulate a regional toolkit on nutrition during emergencies, encompassing essential nutritional supplements, medications and tools.

5. Annex

Nutrition framework for emergency preparedness, response and recovery

Preparedness			
Domain	Strategic interventions	Operational activities	Indicators
Leadership, collaboration and advocacy	Advocate for the integration of nutrition in emergency plans, incorporating an all-hazards approach	Conduct a workshop to engage relevant stakeholders to advocate for the integration of nutrition into emergency preparedness, response and recovery plans Develop several expected scenarios for advocacy and emphasize an all-hazards approach to ensure flexibility in addressing various emergency scenarios Conduct advocacy campaigns to raise awareness about the risks of malnutrition during emergencies and the importance of preparedness	Availability of an emergency plan within national plans, costed and accounted, and with multi-stakeholder standard operating procedures (SOPs)
	Advocate for and support legislation	Advocate for and support the development of legislation ensuring that individuals in humanitarian crises have access to a minimum/essential nutrition package (meetings) Collaborate with lawmakers and policy-makers to reinforce the importance of nutrition in emergency situations	Availability of legislation and policies to support the preparedness plan

Preparedness			
Domain	Strategic interventions	Operational activities	Indicators
Resource mobilization and finance	Develop a strategic financial assessment on preparedness for emergency situations	Conduct a thorough assessment of the current situation, considering potential acute events and their financial implications Develop multiple financial models for different scenarios, identifying possible funding sources and initiating coordination efforts at the preparedness stage	Availability of a specific nutrition fund within the preparedness plan
	Allocate specific funding to support essential nutrition services and medicines	Advocate for the allocation of dedicated funding to support essential nutrition services and medicines within overall preparedness plans Ensure that the funding pool includes resources specifically earmarked for nutrition interventions	
Service delivery, human resources, medications and technologies	Define a minimum/essential nutrition service package, including guidelines, SOPs and protocols	Develop national policy for a minimum/essential nutrition service package Develop operational guidelines and protocols to guide the implementation of nutrition interventions during emergencies Regularly review and update these guidelines to reflect evolving situations and best practices	Existence of national essential nutrition services during emergencies guideline
	Secure essential medications and supplies	Ensure the availability of essential medications and supplies, including the nutrition emergency kit (PED/SAM kit) Develop an action plan or mechanism for efficient distribution during emergencies	Existence of essential nutrition supplies that can be used during an emergency

Preparedness			
Domain	Strategic interventions	Operational activities	Indicators
Information and data, digital health, and research	Map and build the capacity of health and nutrition care/service providers in nutrition interventions for all partners, government and nongovernmental organizations	Map existing health and nutrition care/services providers, including government agencies and nongovernmental organizations Conduct training programmes to enhance the skills and knowledge of these providers in nutrition interventions for emergency situations	Number of people trained on management of severe acute malnutrition (SAM) cases
	Strengthen the information system, with a focus on an early warning system	Enhance systems for monitoring nutrition and establish an early warning system for emergencies Identify reliable sources of information to monitor the situation in the country Conduct capacity mapping of staff working on surveillance system at district level	Availability of surveillance systems to collect data on nutrition and share regular reports
Community engagement, communication and trust building	Scale up digital health, including telemedicine	Expand the use of digital health tools, such as telemedicine, customized for emergency situations Ensure that these tools are accessible and effective in providing remote health services	
	Integrate community nutrition interventions for emergencies	Conduct capacity mapping of community nutrition interventions, focusing on nongovernmental organizations and their capabilities Develop a specific action plan that integrates community nutrition interventions for emergencies Collaborate with different sectors to ensure a comprehensive understanding of needs and set up coordination mechanisms involving multiple sectors for a cohesive response at the community level	Availability of community platforms/networks

Preparedness			
Domain	Strategic interventions	Operational activities	Indicators
	Engage communities	<p>Use the nutrition framework for emergency preparedness, response and recovery to raise awareness among communities about emergency preparedness</p> <p>Engage and empower communities to actively participate in planning responses based on their needs</p> <p>Create mechanisms for feedback and dialogue between communities, health authorities and other stakeholders</p>	
	Strengthen the capacity of community health workers	<p>Provide training to community health workers, volunteers, peer educators and individuals with relevant experience</p> <p>Create clear operational guidance and key messages for community nutrition interventions to equip them to deliver nutrition health services effectively in emergency settings</p>	<p>Availability of guidance on use of supplementary food, therapeutic foods, infant and young child feeding practices in emergencies (IYCF-E), etc.</p>

Response			
Domains	Strategic interventions	Operational activities	Indicators
Leadership, collaboration, and advocacy	Establish collaboration and coordination among all sectors and stakeholders	Designate a focal point within each country to lead and coordinate emergency response efforts	Availability of assigned focal point for nutrition in emergencies
		<p>Establish clear communication channels for efficient coordination and information flow among stakeholders, for example, the activation of a nutrition cluster</p> <p>Facilitate collaboration among different sectors, organizations, humanitarian agencies and relevant stakeholders, for example, through a nutrition taskforce committee</p> <p>Regularly convene coordination meetings to streamline efforts, share updates and address emerging challenges</p>	
Resource mobilization and finance	Ensure resource mobilization and fund management	<p>Develop mechanisms for financial protection for people in emergency settings, irrespective of national status</p> <p>Mobilize and coordinate resources to ensure flexible funding availability to cover priority urgent needs</p>	Availability of financial protection mechanisms
	Prioritize activities for nutrition in emergencies and fund allocation	Review and adapt contingency funding to specifically prioritize nutrition needs during the emergency.	Availability of contingency funding to cover nutrition needs during the emergency response


Response			
Domains	Strategic interventions	Operational activities	Indicators
Service delivery, human resources, medications and technologies	Ensure a continuum of care for essential nutrition services	Integrate nutrition interventions into national health and related sectors' response plans during emergencies	Availability of an integrated protocol for provision of health and nutrition services during emergency
		Provide nutrition services, with a focus on management of SAM, and prepare stabilization centres	
	Ensure supply of essential medicines and equipment	Maintain a continuous supply of essential medicines, including the SAM kit, and necessary technologies for management of acute malnutrition at health facilities	
	Undertake capacity-building	Deploy an adequate workforce, including community-based health workers	Availability of roster of human resources
		Provide rapid training in nutrition, focusing on SAM management and IYCF in emergency settings	Number of health workers and community cadres trained
Information and data, digital health and research	Integrate nutrition information systems and indicators into the emergency reporting system	Integrate all nutrition indicators into initial rapid assessment tools and regularly map service needs	Availability of nutrition rapid assessment data/reports as part of emergency assessments
		Include nutrition surveillance as part of the emergency dashboard of the health emergency operation centre (HEOC)	Availability of regular health facility reporting mechanism on nutrition services

Response			
Domains	Strategic interventions	Operational activities	Indicators
Community engagement, communication and trust building	Ensure community participation and active engagement in the response	<p>Develop a plan or mechanism for real-time data collection, utilizing evidence to report on nutrition service provision from health facilities to inform response efforts</p> <p>Ensure full participation of community networks and nutrition stakeholders in the response</p> <p>Establish communication exchange channels during emergencies for access to relevant nutrition information on health promotion, treatment and services</p> <p>Foster collaboration among community networks, nongovernmental organizations and the private sector to align response efforts in addressing nutrition in emergencies</p>	Availability of clear channels and mechanisms for community participation

Recovery			
Domains	Strategic interventions	Operational activities	Indicators
Leadership, collaboration, and advocacy	Establish technical working groups	Formulate technical working groups focused on nutrition, including representatives from relevant sectors and stakeholders Ensure these groups are adequately resourced, empowered and responsible for guiding nutrition interventions during the recovery stage	Existence of operational technical working groups
	Integrate nutrition in the national health recovery strategy and development agenda	Develop a comprehensive recovery plan (strategic plan) addressing key areas such as restoring essential services, re-establishing supply chains, ensuring adequate resources and promoting community engagement, aligning it with the broader development agenda and the principles of the humanitarian-development-peace nexus Collaborate with relevant stakeholders to implement the recovery plan, focusing on community needs and a sustainable transition	Existence of a developed, costed and implemented early recovery plan for the nutrition sector
Resource mobilization and finance	Secure funding for an extended duration and guarantee a long-term sustained fund	Ensure nutrition is integrated into funding proposals presented to donors during the recovery phase Conduct a comprehensive assessment of resource requirements for nutrition interventions and develop a funding plan for uninterrupted services during the transition from humanitarian to domestic funds	Existence of financial plan with allocated budget for nutrition programmes
Service delivery, human resources,	Enhance comprehensive nutrition interventions for improved public health	Strengthen the prevention component of nutrition responses across different sectors	Percentage of functional health facilities providing nutrition services

Recovery			
Domains	Strategic interventions	Operational activities	Indicators
medications and technologies	Strengthen human resources and institutional capacities	Expand the scope and quality of nutrition services, emphasizing early detection and management Enhance human resources and institutional capacities to ensure the continuity and quality of nutrition services during recovery	
	Support nutrition supplies and technology	Ensure the availability, affordability and quality of nutrition kits and technology, guided by WHO recommendations, with a commitment to equity and equality, and avoiding discrimination	
Information and data, digital health, and research	Advance data-driven nutrition initiatives in post-emergency recovery	Conduct capacity assessments and mapping/review of nutrition services/interventions during the transition to the recovery phase	Availability of nutrition capacity assessment and service mapping report
		Strengthen and build a nutrition surveillance system, guided by global nutrition targets and integrated into the existing health information system Promote the use of digital health care solutions, such as electronic health records, telemedicine platforms, mobile health applications and other digital tools and dashboards, to enhance efficiency and accuracy in data management	
Community engagement, communication, and trust building	Strengthen community engagement for holistic recovery	Enhance mechanisms for multisectoral collaboration and feedback, ensuring continuous communication between communities and recovery efforts Empower community networks, facilitating their full participation in the recovery planning process	Availability of multisectoral coordination mechanisms (such as committees)

Recovery			
Domains	Strategic interventions	Operational activities	Indicators
	Establish sustainable community interventions/programmes for lasting impact	<p>Advocate for and adapt community interventions into long-term programmes, integrating them into sustainable development initiatives</p> <p>Establish and strengthen community support groups to provide a platform for sharing experiences and information, fostering community resilience and trust-building</p>	Availability of support groups (at least 10 new groups within the first year), fostering community resilience and trust-building



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