

Republic of the Philippines REGIONAL NUTRITION COMMITTEE MIMAROPA



RNC Resolution No. 2, s. 2021

ENJOINING ALL LOCAL GOVERNMENT UNITS (LGUs) IN MIMAROPA REGION TO ORGANIZE NUTRITION CLUSTERS AT THE PROVINCIAL, CITY, MUNICIPAL, AND BARANGAY LEVELS AND ENSURE FUNCTIONALITY RELATIVE TO EMERGENCIES AND DISASTERS

WHEREAS, the Philippines, particularly the MIMAROPA Region, with its geographical location, is generally prone to human-induced and natural emergencies such as earthquakes, volcanic eruptions, tropical cyclones and floods;

WHEREAS, NNC Governing Board Resolution No. 1, s. 2009 requires the delivery of quality nutrition and related services in times of emergencies that should be facilitated through clear and practical quality standards;

WHEREAS, further to the same NNC Governing Board Resolution, the nutrition committee of each LGU shall function as the local nutrition cluster, and during emergencies, shall be considered as part of the health cluster together with the WASH cluster and the mental health and psychosocial support cluster;

WHEREAS, the local nutrition cluster should take charge of nutrition management in emergencies and disasters, and ensure that the nutritional status of affected populations will not worsen;

WHEREAS, in the absence of a functional nutrition committee, efforts must be exerted to reactivate said committee to include instrumentalities not limited to the health unit, nutrition unit, social welfare and development unit, public school system, academic institutions, other agencies, and non-governmental organizations;

WHEREAS, the Department of Health released Administrative Order No. 2017-0007 dated 23 May 2017 or the Guidelines in the Provision of the Essential Health Service Packages (ESHPs) in Emergencies and Disasters;

WHEREAS, ESHP should focus on four (4) clusters: Medical and Public Health, Nutrition, Water and Sanitation Hygiene, and Mental Health and Psychosocial Support;

WHEREAS, the Recommended Nutrition Cluster Response, also called the Minimum Service Package for nutrition, aims to guide the nutrition cluster at the local levels on what to do immediately during emergencies and disasters, particularly during the first 72 hours to prevent worsening of nutritional status and death;

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WHEREAS, a series of trainings of Nutrition in Emergencies and Information Management will be conducted at the local level;

NOW THEREFORE, BE IT RESOLVED AS IT IS HEREBY RESOLVED, all Local Government Units in the MIMAROPA Region through the Provincial / City / Municipal and Barangay Nutrition Committees are enjoined to organize their nutrition clusters and ensure the following actions relative to emergencies and disasters:

- 1. In preparation, conduct capacity-building on Nutrition in Emergencies and Information Management, formulate multi-sectoral emergency preparedness plan on nutrition, and do resource mapping and prepositioning of essential commodities.
- 2. Provide for the nutritional requirements of the general population and vulnerable groups through nutrition assessment, infant and young child feeding, food assistance, management of acute malnutrition, and micronutrient supplementation, in accordance with national and international standards. These must be supported with nutrition education as well as interventions related to food, health, mental health and psychosocial support, WASH, social welfare, food security, and livelihood.
 - a. Assess relief effort and assistance, shelter, food security, sanitation facilities, conduct gap analysis and planning of nutrition interventions.
 - Mobilize community health and nutrition volunteers and peer support groups within 24 hours.
 - c. Conduct infant and young child feeding (IYCF) assessment, followed by promotion, protection, and support of IYCF in emergencies, including establishment of supportive care to exclusive breastfeeding, re-lactation, and special dietary restrictions within 72 hours.
 - d. Conduct rapid nutrition assessment within the first two days following the emergency to identify level of malnutrition in the affected area and to identify severe and acute malnutrition cases for immediate treatment and referral.
 - i. Gather anthropometric data such as weight, height, and mid-upper arm circumference
 - ii. Gather data on sex, age, and presence of bilateral pitting edema
 - e. Identify, and refer cases of severe acute malnutrition with complications within 72 hours to a treatment center for the integrated management of acute malnutrition.
 - f. Administer micronutrient supplements aligned with existing guidelines under DOH AO No. 2010-0010, s. 2010 on the Revised Policy on Micronutrient Supplementation and DOH DM 2011-0303.
 - g. Organize targeted supplementary feeding covering children 6-59 months, pregnant and lactating women, and other at-risk groups.
 - h. Conduct nutritional assessment and implement appropriate response interventions and management of acutely malnourished children, pregnant and lactating women, children with micronutrient deficiencies, and those who are stunted.
 - i. Monitor compliance to the Milk Code (EO 51) and identify violations particularly donations of infant formula and breastmilk substitutes, and take action accordingly.

RESOLVED FURTHER, that the provincial, city, and municipal nutrition action officers to harmonize with respective local nutrition committees to ensure adoption of the resolution along with organization or reorganization of local nutrition clusters;

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RESOLVED FURTHER, that the LGUs to adopt the resolution and pass appropriate policy instrument such as Executive Orders, SB Resolution or SB Ordinances in support to the policy through appropriate coordination and funding;

RESOLVED FINALLY, to request the Department of Interior and Local Government (DILG) MIMAROPA, in cooperation with the NNC and Regional Disaster Risk Reduction and Management Council (RDRRMC) to monitor LGU action and provide reports on the matter.

Unanimously approved this 27th day of May 2021 during the Regional Nutrition Committee meeting held online via Zoom Application.

Attested by:

Millen

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