GUIDELINES FOR RESIDENTIAL INSTITUTIONS

KEEPING CHILDREN NOURISHED DURING THE COVID-19 PANDEMIC

Children in institutional care are highly vulnerable to being adversely affected by COVID-19. The pandemic may limit the capacity of residential institutions to provide safe, nurturing, and appropriate care, and may reduce the availability of and access to a nutritious diet. Compromised nutrition can have long-lasting and profound consequences for all children, especially young children and those with disabilities. This document provides guidelines for residential institution administrators to keep children nourished and their immune systems strong during the pandemic through diverse, nutrient-dense foods. The guidelines also call attention to the unique needs of children with disabilities, the importance of maintaining good hygiene and food safety practices, and caregiver training and support.

GOOD NUTRITION IS THE FOUNDATION FOR STRONG IMMUNITY AND HEALTH

Good nutrition supports the body's ability to fight off infections and respond to treatments. Evidence shows that, in general, undernourished children have reduced immunity and face increased susceptibility to infections. Poor appetite, increased nutritional requirements, and impaired nutrient absorption caused by infections exacerbate their already-compromised nutrition reserves. Children end up stuck in a self-perpetuating cycle of undernutrition and infectious disease. Also, illness tend to be more severe for malnourished children. An undernourished child is nine times more likely to die from complications arising from infections than a well-nourished child.¹ In addition to the World Health Organization (WHO) measures to prevent COVID-19², maintaining adequate nutrition can increase children's chances for better health outcomes and survival during the pandemic.

IMMUNITY-SUPPORTING NUTRITION

There are many nutrients involved in the normal functioning of the immune system.³ Foods high in these nutrients should be prioritized in the diet to keep children's immune systems strong.

Offer a variety of nutrient-dense foods to children to support healthy growth and development.







Prioritize foods high in immunity-supporting nutrients

IMMUNITY-SUPPORTING NUTRIENTS	FOOD SOURCES (Choose what is available in your community)
Protein	Milk, yogurt, meat, fish, chicken, eggs, nuts, seeds, and beans.
Vitamin A	Leafy greens, carrots, sweet potatoes, pumpkin, tomatoes, broccoli, mango, and papaya.
Vitamin C	Citrus fruits, mango, papaya, tomatoes, cabbage, leafy greens, peppers, and broccoli.
Vitamin D	Fatty fish, liver, and eggs. Also, sunshine.
Zinc	Meat, chicken, fish, beans, and nuts.
Iron	Meat, chicken, fish, beans, and nuts.
Selenium	Fish, beef, chicken, eggs, and beans, milk, and yogurt.
Magnesium	Leafy greens, nuts, beans, yogurt, milk, and whole grains.
No one food or nutrient can cure or prevent COVID-19. Follow WHO guidelines for prevention and treatment.	



GUIDELINES FOR RESIDENTIAL INSTITUTION ADMINISTRATORS

Diet and menu

- O Revise menu to include available immunity-supporting foods.
- O Offer foods high in vitamin A at least three times a week. Offer foods high in vitamin C and foods high in iron at least once a day together to make the iron more available for use by the body.
- O In every meal, offer **growth food** (legumes, nuts, seeds, dairy, meat, fish, eggs, and poultry), **energy food** (grains, roots, and tubers), and **protection food** (orange/yellow fruits and vegetables and dark green leafy vegetables).
- O If access to fresh produce is difficult, use **dried, canned, or frozen** alternatives.
- O If foods with the recommended nutrients are not provided by the diet, then consider multivitamin supplements.
- O **Limit highly processed foods** with low nutritional value, like sugary drinks, candy, chips, and cookies. Instead, offer immune-supporting foods as snacks.
- O Ensure young children stay well-hydrated by offering 8-10 cups of safe drinking water each day.

Hygiene and food safety

- O Enforce **strict hygiene and food safety practices**, such as proper handwashing and regular disinfecting of food preparation areas.
- O **Do not share spoons** or bowls among children.

Growth monitoring

- O Establish or continue growth monitoring for early detection and treatment of undernutrition.
- O Identify children with disabilities and undernourished children who may need more targeted support.

Staff training and support

- O Talk to staff about how nutrition and good hygiene can help children stay healthy and fight illness.
- O **Train caregivers** on how to safely feed children with disabilities.
- O **Support caregivers'** physical and mental health.

ADDITIONAL CONSIDERATIONS FOR CHILDREN WITH DISABILITIES

Many children with disabilities in residential institutions have underlying health conditions. Those with feeding difficulties, such as difficulty swallowing and sitting upright for feeding, often have increased nutritional needs and weakened immune systems. They frequently experience cough, aspiration, and respiratory illness.⁴ Not only can these conditions be worsened by COVID-19, they may also increase the risk of serious complications from the infection. As a result, more children will suffer from malnutrition and fewer children will survive. It is therefore critical to follow safe practices when feeding children with disabilities:

- O Feed children in **as upright a position as possible** to support safe swallowing and efficient feeding. Maintain position, with head supported if needed, whether child is sitting on the floor, in a lap, or on a chair.
- O Slow the feeding pace to allow the child to swallow between bites.
- O Offer foods in textures the child can chew and manage easily.
- O Use **small spoons.** A spoon should easily fit in the child's mouth.



Upright position with hips stable and body in a straight line



¹ WHO Global health risks: mortality and burden of disease attributable to selected major risks. 2019; available at: http://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf.

² Visit the WHO resource page on COVID-19 available at: https://www.who.int/emergencies/diseases/novel-coronavirus-2019.

Roth E et al. Acute lower respiratory infections in childhood: opportunities for reducing the global burden through nutritional interventions. Bull World Health Organ 2008; 86: 356-64.

⁴ Rabaey P. A Review of feeding interventions for children with disabilities: implications for institutionalized settings. Int J Therapy Rehab 2017; 24 (4): 174-9.