



Use of Milk in WFP operations

Position Paper



World Food Programme

This position paper outlines WFP's position on the use of milk. In most cases, and especially in emergency settings, WFP does not support the use of milk due to the risk of breastmilk substitution and concerns of food safety and handling. However, recognizing the nutritious value of milk, there are two exceptional cases in which the use of milk may be appropriate.

Commitment to Breastfeeding

WFP discourages the use of milk (from both animals and plants) in its operations because there is a high risk that it will be used as a breastmilk replacement for young children.¹ Breastmilk is exceptionally nutritious, and is the best source of energy, nutrients and other building blocks of the immune system during the first 6 months of life. Breastfeeding is essential to WFP's ongoing efforts to save lives and combat malnutrition. Optimal breastfeeding can save the lives of some 823,000 children under 5-years old annually.²

WFP's commitment to promoting breastfeeding is reaffirmed by its Nutrition Policy (2017-2021)³ and a 2016 Executive Director Circular.⁴ As the global efforts to fight malnutrition are realized through partnership, WFP's position to avoid the distribution of breastmilk substitutes is also aligned with the policies of UNICEF, WHO, UNHCR and other key partners in the nutrition sector.⁵

Food Safety and Handling Concerns

Concerns also prevail regarding the storing, handling, and safe preparation of milk. Any milk product that cannot be stored and handled appropriately (e.g. temperature controlled, sturdy packaging) will spoil very quickly. Moreover, any milk product that has a high chance of being mixed with unsafe water can lead to high levels of bacterial contamination, diarrhoea, and potentially mortality. This risk is heightened in emergency settings where clean water is in short supply.

Upholding cost-effectiveness is equally challenging for milk in liquid form given the high transport costs of a voluminous product. Any increase in supply chain costs potentially

reduces the number of nutritionally vulnerable people who could otherwise be reached for the same amount of money.

Milk in General Distributions

Given the above considerations and risks, WFP does not support the use of milk in general food assistance programmes, especially those in emergency settings. This stance also includes food assistance programmes that use *restricted*⁶ cash-based transfers (CBT) and/or commodity vouchers. There is no evidence to suggest milk provided through these modalities can uphold safety standards and not jeopardize breastfeeding. Any change in this position would need to be corroborated by evidence and supported by other nutrition stakeholders and partners. Recognizing that beneficiaries of *unrestricted* CBT in dairy-consuming societies may choose to purchase milk, WFP's position is that a Social Behaviour Change Communication strategy that promotes breastfeeding and monitors age-appropriate feeding must be part of the programme.

Milk for Older Children

While WFP restricts the use of milk for the aforementioned reasons, it is also acknowledged that milk can be a much-needed source of vitamins, minerals and protein for nutritionally vulnerable populations. Milk and its derivatives are nutrient-rich and good sources of calcium, vitamin D, protein and other essential nutrients (e.g. phosphorus, potassium, magnesium, and vitamins A, B12, and riboflavin). WFP therefore believes that milk can have an important positive impact on nutrition, especially for children above age 2.

1 This is in line with the international recommendations of *Food and Nutrition Needs in Emergencies*, UNHCR, UNICEF, WFP and WHO, 2007.

2 Victora, Cesar G et al. Breastfeeding in the 21st century: Epidemiology, mechanisms, and lifelong effect. *The Lancet*, Volume 387, Issue 10017, 475 - 490, 2016.

3 [WFP Nutrition Policy 2017-2021](#)

4 [Executive Director's Circular: The Promotion of Breastfeeding in WFP Programmes](#)

5 See: WHO's [International Code of Marketing of Breastmilk Substitutes](#) and UNHCR's [policy on milk in refugee settings](#)

6 *Restricted* means that the CBT/voucher is only redeemable for specific food items.

Exceptional Uses of Milk

Given that a substantial number of people that WFP serves would benefit from reliable access to an affordable and nutritious animal source food, there are two exceptional circumstances in which milk can be used in WFP operations:

1. It can be used as an ingredient in other products so that it cannot be used as a breastmilk substitute.

Since 2008, WFP and others have championed the inclusion of dried skim milk in certain types of porridge pre-mix to enhance their positive effect on nutrition.⁷ In order to consume the porridge, the pre-mix is prepared and boiled with water. The boiling process kills potential contaminants and minimizes food safety risks. However, WFP must still provide training on the safe preparation of the porridge pre-mix, and strictly monitor the preparation to ensure food safety.

Given that DSM is an ingredient of porridge pre-mix, and since the consistency and appearance of porridge is too dissimilar to breastmilk, it is highly unlikely that porridge pre-mix will be used to substitute breastmilk.

Milk can also be used safely as an ingredient in locally-produced processed foods (e.g. biscuits), and in dairy products (e.g. cheese, yogurt) that are managed through a well-controlled supply chain that guarantees safety and quality. The complexities of the transactions and transport involved however may mean that using milk to produce other foods is an inefficient use of resources.

2. It can be distributed to older children through platforms that are outside of the home, where safety and quality standards can be guaranteed.

In a number of countries where WFP delivers school meals, milk is provided in combination with other foods to support access to an adequately nutritious diet.⁸ The inclusion of milk in these programmes provides growing school-aged children (from age three onwards) reliable access to a much-needed animal source of protein, minerals and vitamins.

There is low risk of milk provided as part of a school meal being used as a breastmilk replacement because it is served outside the home and to an age group that has outgrown breastfeeding.

Safety risks are further minimized as the milk is generally pre-packaged in plastic-coated cartons. In this form, the milk has undergone ultra-high temperature processing to ensure quality and safety. While schools provide on-site cooking facilities and are controlled environments, the preparation of milk (i.e. the reconstitution of milk powder) on-site should be avoided given the risk of unsatisfactory hygiene and sanitation conditions.

In these two cases, WFP must ensure:

- Milk or the dairy product is context appropriate (i.e. where dairy is part of the local diet).
- Appropriate storage facilities exist for the dairy foods at all levels in the supply chain, including at the household level.
- Rigorous monitoring, and where necessary direct observation, is done to mitigate any risk of breastmilk replacement or food safety concerns.
- Key messaging (which must be informed by context analysis, particularly around how milk/dairy products are commonly consumed and by whom) is provided to promote breastfeeding and appropriate, safe consumption of milk products.

Where there is a resource or political imperative to accept a milk donation or use milk in a food assistance programme, WFP is willing to work with donors/recipient countries to find the right settings (where the aforementioned exceptions apply and where milk can be programmed effectively) to contribute to nutrition in a positive way.

⁷ such as SuperCereal *Plus*, other specialized nutritious foods and lipid-based nutrient supplements

⁸ Syria, Cape Verde, Zambia, Haiti, Nicaragua, to name a few country examples.



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