

Regional training package on integrated care for health and development of newborns and children under five at home

FLIP BOOK



World Health
Organization

Eastern Mediterranean Region



**Regional training
package on
integrated care for
health and development
of newborns and
children under five at
home**

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WHO Library Cataloguing in Publication Data

Names: World Health Organization. Eastern Mediterranean Region

Title: Regional training package on integrated care for health and development of newborns and children under five at home: flip book / World Health Organization. Eastern Mediterranean Region

Description: Cairo: World Health Organization. Eastern Mediterranean Region, 2024

Identifier: ISBN 978-92-9274-345-1 (pbk.) | ISBN 978-92-9274-346-8 (online)

Subjects: Delivery of Health Care, Integrated | Infant Care | Child Care | Infant, Newborn | Maternal-Child Health Services | Community Health Workers | Home Care Services | Child Development | Books, Illustrated

Classification: NLM WS 440

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Foreword

Families play a vital role as the primary caregivers for their newborns and young children, particularly in challenging environments where access to health services is limited. To fulfil this role effectively and ensure their children's well-being, they require guidance, practical skills, confidence and core resources. Strengthening home-based care and community-level interventions is essential to bridge gaps in the health system and reach children who might otherwise lack access to timely preventive and treatment services.

With that in mind, WHO's team in the Eastern Mediterranean Region has developed this regional training package on Integrated care for the health and development of newborns and children under five at home, to equip community health workers/promoters with the skills and knowledge to support families in providing essential care at home.

Scientific evidence underscores that early childhood is a critical period when interventions can have lasting impacts, shaping an individual's health, well-being and cognitive potential throughout their life. This training package is designed to strengthen the role of community health workers as health promoters, counsellors and advocates for early childhood health and development. It provides practical, up-to-date and adaptable guidance to promote optimal family practices, prevent childhood illnesses and injuries, and ensure a strong foundation for lifelong well-being.

This package aligns with WHO's global and regional strategic priorities, as set out in our Strategic operational plan for the Eastern Mediterranean, 2025–2028. It forms part of our flagship initiative to build a more resilient health workforce across the Region, and also complements the Regional implementation guidance for newborn, child and adolescent health and development.

WHO remains committed to supporting countries in scaling up integrated community-based approaches to child health. I encourage all stakeholders – health ministries, policy-makers, trainers and care providers – to utilize this package as a tool for building national capacity, strengthening health care systems and advancing child health and development in the Region. By working together, we can ensure that every child has the opportunity to survive, thrive and reach their full potential.

Dr Hanan Balkhy
WHO Regional Director for the Eastern Mediterranean

Acknowledgements

This publication was developed by WHO's Child and Adolescent Health team in the Eastern Mediterranean Region under the overall guidance of Dr Jamela Al-Raiby and Dr Khalid Siddeeg. Special appreciation is extended to Dr Suzan Farhoud, a newborn, child and adolescent health expert, for her substantial contribution to the training package.

Advisers and reviewers included Dr Zainelabdin Abdelrahim Karrar and Dr Shaza Sidahmed Mohammed (Sudan), Dr Aziza Lyaghfouri (Morocco), Dr Nandlal Moorpani (Pakistan), Dr Mona Rakha and Dr Mohamed Abdelmoneim (Egypt), and Dr Arwa Baider (UNICEF).

WHO expresses its gratitude to all those involved in the field testing of this package in Morocco, as well as to the training participants whose time and valuable feedback helped to refine the content.

Caring for health and development of newborns and young infants less than two months at home

Component 1. Keeping the baby warm



Keeping baby warm



Always remember to wash your hands

Position baby between breasts.
Put legs in frog position under breasts, and arms above

Put on loose clothing over the wrap

Securely wrap the baby

Steps of skin-to-skin contact

Caring for health and development of newborns and young infants less than two months at home

Component 1. Counselling on keeping baby warm

- During pregnancy your body maintains your baby's temperature.
- Newborns have not developed the ability to adjust their temperature after birth.
- Keeping newborns warm is essential. A drop in body temperature can lead to death.
- Your body is better than an artificial warmer.
- Skin-to-skin contact is the best way to keep a newborn warm during the first hours of life.
- Delay bathing until 24 hours after birth to avoid chilling and lowering baby's temperature. Delay for longer if the baby is sick, underweight, or if the weather is cold.
- You should not be separated from your baby. Stay in the same room 24 hours a day.
- Twenty-four hours after birth your baby's clothing should be appropriate for the room temperature and include one or two layers more than adults. The baby should also be covered with a light warm blanket.

If you visit the mother during or immediately after delivery:

- Wash your hands.
- Warm the room where delivery takes place.
- Dry the baby immediately after birth and remove wet towels.
- Put the baby directly on the abdomen of the mother.
- Put a cap and socks on the baby.
- Teach the mother steps of skin-to-skin care as per the drawings.

Caring for health and development of newborns and young infants less than two months at home

Component 2. Early initiation of breastfeeding



Start breastfeeding within the first hour after delivery



Baby is ready to breastfeed



EARLY INITIATION OF BREASTFEEDING

Component 2. Counselling on early initiation of breastfeeding

Breast milk is the best and safest food for newborns and infants younger than two months. It contains all the nutrients your baby needs. Start breastfeeding within the first hour after delivery, as soon as your baby is ready. Your baby is ready to breastfeed when s/he opens her/his mouth and suckles her/his finger or hand. Crying is not a sign of readiness to be breastfed.

Initiating breastfeeding within the first hour after delivery has many advantages:

- baby gets all the benefits of the first milk (colostrum or yellow milk)
- it keeps baby warm
- it promotes bonding between mother and baby
- it helps expel the placenta, reduces placental bleeding and reduces maternal bleeding
- it can prevent breast engorgement.

Colostrum is the first yellow milk and it feeds the baby for three to four days. It is produced in small amounts, just enough for the baby's tiny stomach. It is not "dirty milk" that should be squeezed until the mature milk comes.

Colostrum:

- protects baby from infection
- helps prevent jaundice
- helps brain and eye development
- helps intestinal growth and development.

Effective frequent suckling brings the right amount of milk to the breast.

Caring for health and development of newborns and young infants less than two months at home

Component 2. Early initiation of breastfeeding

Advantages of breastfeeding and dangers of artificial milk



Breastfeeding creates a strong bond between mother and baby, and breast milk is the best food for newborns

Component 2. Early initiation of breastfeeding: advantages of breastfeeding and dangers of artificial milk

Advantages of breastfeeding

- Breastfeeding helps the baby bond with you and stimulates baby's development.
- Breast milk is the best and cleanest food for newborns.
- Breast milk includes all the nutrients your baby needs to grow and develop, in an easily digestible and absorbable form.
- It helps prevent jaundice and has a laxative effect.
- It protects babies from infection and allergies.
- It protects your baby from chronic diseases such as diabetes and obesity.
- It may help your baby develop intellectually.
- It is important for your health. It reduces bleeding after delivery and the risk of ovarian and uterine cancer, and delays pregnancy.

Dangers of artificial milk

- Interferes with bonding and negatively affects baby's development.
- Increases respiratory infections and places baby at a greater risk of fatality.
- Higher risk of persistent diarrhoea, malnutrition and vitamin A deficiency.
- Increases risk of allergies and milk intolerance.
- Increases risk of chronic diseases such as obesity, diabetes and cancer.
- Risks lower scores in intelligence tests.
- It may harm your health: you will be at risk of anaemia because of bleeding, and of ovarian and breast cancer, and you may become pregnant sooner.

Caring for health and development of newborns and young infants less than two months at home

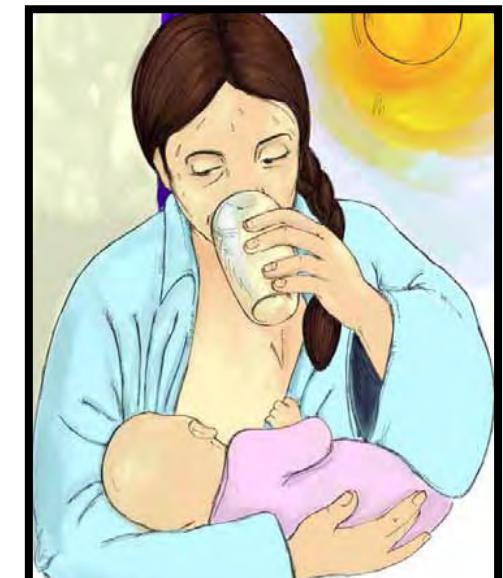
Component 2. Early initiation of breastfeeding



Breastfeed your baby on demand, day and night



Exclusive breastfeeding allows baby to grow and develop healthier and will increase milk production



Breast milk contains all the water baby needs
Drink water yourself and breastfeed the baby frequently

Component 2. Counselling on early initiation of breastfeeding

Exclusive breastfeeding

- Breast milk is the most suitable and cleanest food for a newborn. It has all nutrients baby needs, is easily digestible and protects newborns from infection, allergy, obesity and cancer. It increases the bond between mother and baby.
- Breastfeed your baby on demand, day and night, at least eight times a day.
- Do not give the baby anything else, including artificial milk or water, even in hot weather. Your milk has all the water baby needs.
- In hot weather don't give water to your baby. Drink the water yourself and increase breastfeeds for your baby. Your milk has all the water s/he needs.
- Never use a bottle for your baby. It can carry infection and may create nipple confusion.
- Breast milk at the beginning of the breastfeed (fore-milk) is transparent, and includes a large amount of water and some nutrients. Breast milk at the end of the breastfeed (hind-milk) is thick and white and includes fats, which give energy baby will reach.
- Babies should be left at the breast so they can take both fore- and hind-milk, otherwise they will not take all the necessary nutrients and will feel hungry.

Caring for health and development of newborns and young infants less than two months at home
Component 2. Early initiation of breastfeeding

Correct positioning and attachment is a major factor in successful breastfeeding



Good attachment



Poor attachment



Good positioning



Poor positioning

Component 2. Counselling on early initiation of breastfeeding

Positioning and attachment

Poor attachment leads to ineffective suckling, which means breasts are not emptied and there will be little production of milk.

Poor attachment may also lead to breast engorgement and nipple pain.

Wash your hands and ask permission of the mother to observe the breastfeed

The following are the signs of good attachment of the baby to your breast:

- more areola is seen above than below the baby's mouth
- baby's mouth is open wide
- baby's lower lip is turned outwards
- baby's chin is touching the breast.

When the baby is well attached, s/he will suckle effectively:

- baby takes slow, deep sucks sometimes pausing in between
- you can see the baby swallow.

In order to be well attached the baby should be well positioned.

Good positioning

- head and body are in line
- baby is held close to mother's body
- baby is facing the breast
- baby's whole body is supported

Poor positioning

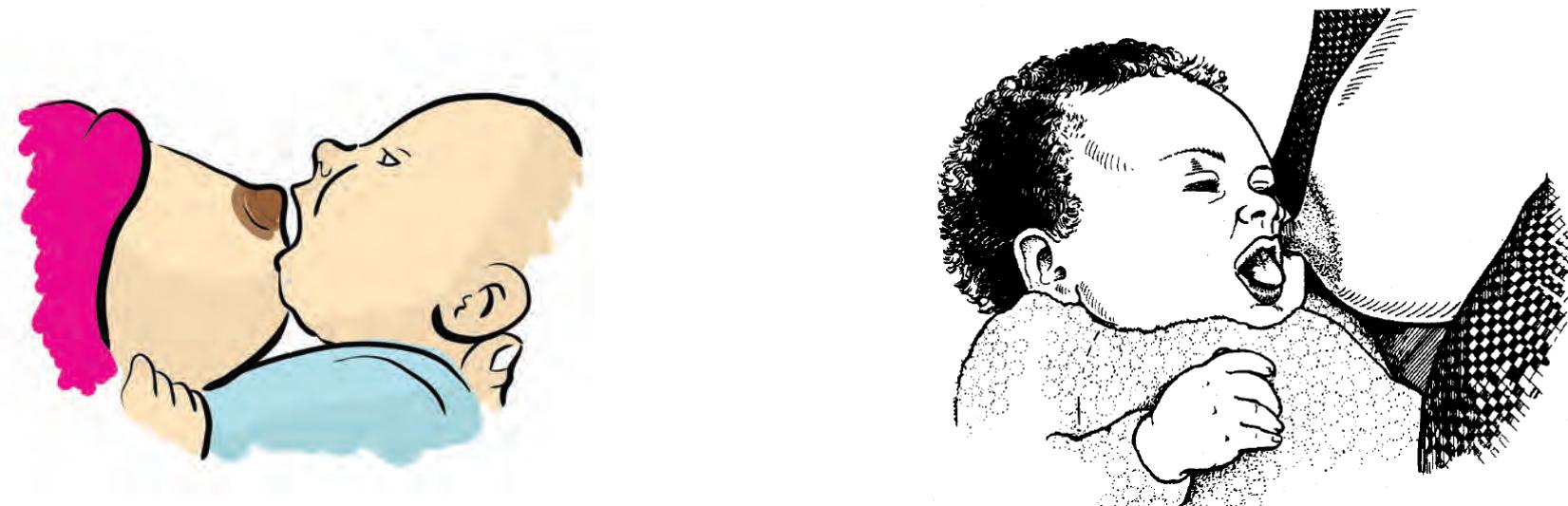
- neck is twisted
- baby is away from mother's body
- baby is not facing the breast
- only baby's upper part of the body is supported

Caring for health and development of newborns and young infants less than two months at home

Component 2. Counselling on early initiation of breastfeeding



You may take different positions when breastfeeding



Mother touches the lips of the baby with the nipple and waits until the mouth of the baby is wide open to latch on

Component 2. Counselling on early initiation of breastfeeding

You may take different positions to breastfeed. What is important is to be comfortable and for baby to be well attached and well positioned and suckle effectively.

Let us now improve baby's attachment:

1. Sit in a relaxed and comfortable position.
2. Let us correct baby's position and make sure it is a good positioning. Poor positioning is the main reason of poor attachment.
3. First touch baby's lips with the nipple (sometimes you may need to express a drop of breast milk into baby's mouth) and wait until baby's mouth is wide open as wide as a yawn. Be patient.
4. When baby opens wide, bring her/him quickly but gently towards your breast, aiming baby's lower lip below your nipple. Do not push your breast towards your baby.
5. You should be able to feel baby suckling effectively.

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 1. Care-seeking practices



Too weak; unable to breastfeed



Convulsions

DANGER SIGNS

Component 3. Counselling on family health care practices

Care-seeking practices

When to seek care (when to take the baby to a health facility)

Check for the presence of danger signs

These are signs, if any appears in the newborn, that indicate a critical illness and the baby needs to be urgently referred to a health facility.

Not able to breastfeed since birth, or stopped breastfeeding well

You may try to put the baby on the breast several times but the baby is too weak to suckle and does not breastfeed at all, or the baby may have started out breastfeeding well but has now stopped.

Convulsions

Baby's arms and legs become stiff. The baby may stop breathing and become blue. There could be a recurring movement of one part of the body, such as twitching of the mouth or blinking of the eyes.

Give only information according to findings of the recording form. Take the permission to check the baby. Remember to wash your hands before touching the baby.

Check if a danger sign is present: if yes, counsel on urgent referral. If not present, teach the mother on danger signs, based on the written advice and drawings.

For unable to breastfeed, if mother says yes, ask her to breastfeed the baby to check for the presence of the sign. For convulsions, you have to observe and if not present ask the mother if child has had convulsions.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 1. Care-seeking practices



Normal movement



Movements less than normal or no movement at all



Yellow palms and soles

Component 3. Counselling on family health care practices

Care-seeking practices

When to seek care (when to take the baby to a health facility)

Check for the presence of danger signs

Third sign: moves only when stimulated, or no movement even with stimulation

What about the

Observe the baby when awake.

- If the baby's arms and legs are moving or baby turns her/his head several times in a minute, there is no danger sign.
- But if she/he is awake and moves only after gentle stimulation, by tapping or flicking the soles, and then stops, or if the baby does not move at all even after stimulation, the baby has a danger sign

Fourth sign: jaundice in the first 24 hours, or yellow palms and soles

Many babies have some jaundice (yellow eyes or skin) in the first week of life. This is not dangerous and disappears in a few days. However, if jaundice appears within the first 24 hours, or the baby's palms and soles are yellow, this is a danger sign, signaling the baby has severe jaundice.

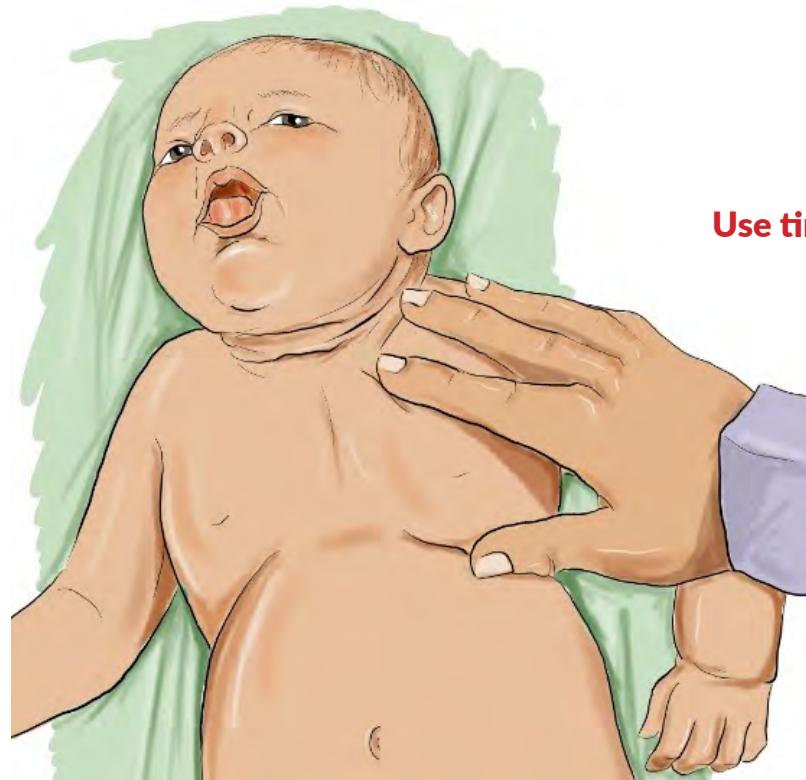
Check if a danger sign is present: if yes, counsel on urgent referral. If not present, teach the mother on danger signs.

To assess for yellow palms and soles:

- See the sign in natural light. Don't use artificial light, it may be yellow itself.
- Press the infants' palms and soles with your thumbs to blanch, remove your thumbs, if the sign is present you will find yellow colour.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home
Component 3. Counselling on family health care practices. 1. Care-seeking practices



Use timer to count breathing rate



Component 3. Counselling on family health care practices

Care-seeking practices

When to seek care (when to take the baby to a health facility)

Check for the presence of danger signs

Fifth sign: fast breathing

Though babies often breathe faster than older infants and children, if you notice your baby is breathing more quickly than normal or that there is difficulty in breathing, this denotes a serious health condition. You need to take the baby urgently to a health facility.

Is the baby fast breathing?

Use a timer to count respiratory rate.

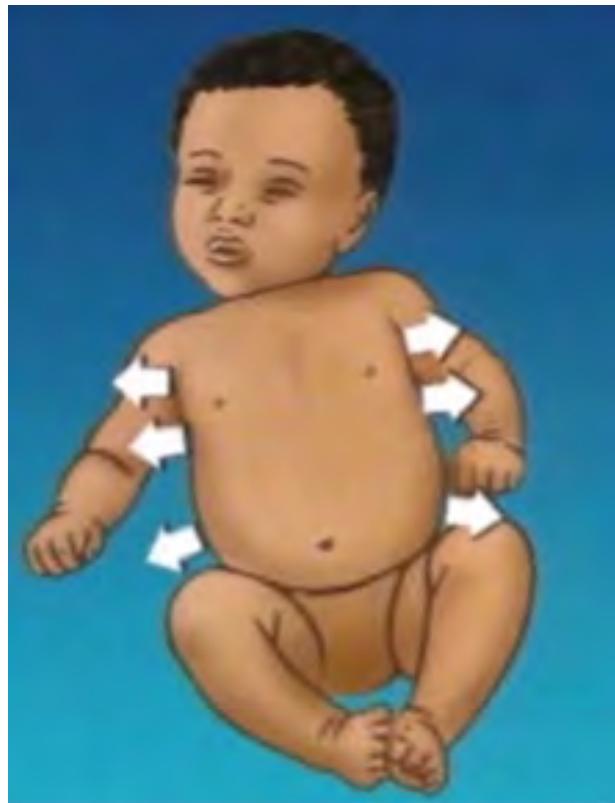
Counting respiratory rate

1. Wait for baby to be calm or sleeping. Do not count when baby is breastfeeding or crying, otherwise the count will be incorrect.
2. Make sure there is enough light to see the breathing movements.
3. Gently lift the baby's shirt so you can see breathing movements.
4. Watch a few breaths until you are sure when the baby is breathing in and out.
5. Start the timer and count breaths for one full minute (until the long beep that marks the end of one minute).
6. If you counted 60 breaths or more, repeat the count and record the number of breaths a second time
7. Do not judge that the baby is fast breathing unless the second count is 60 breaths per minute or more.

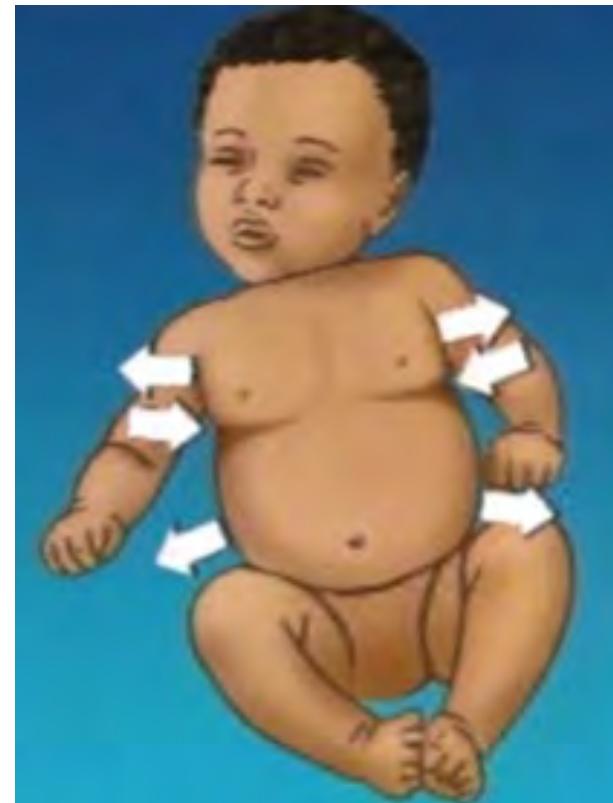
If the baby is fast breathing, urgently refer to a health facility.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home
Component 3. Counselling on family health care practices. 1. Care-seeking practices



Normal breathing: when child breathes in upper and lower chest walls and abdomen **go out**



Severe chest indrawing: when child breathes in upper chest wall and abdomen **go out** while lower chest wall **goes in**

Severe chest indrawing

Component 3. Counselling on family health care practices

Care-seeking practices

When to seek care (when to take the baby to a health facility)

Check for the presence of danger signs

Sixth sign: severe chest indrawing

If your baby is breathing with difficulty and you find a very deep groove between the chest and abdomen the baby has a serious condition and must be taken to a health facility immediately.

Check if a danger sign is present: if yes, counsel on urgent referral.

If not present, teach the mother on danger signs

Chest indrawing is the groove formed between the chest and abdomen because of the lower chest wall going IN when the child breathes IN, at the same time the upper chest and abdomen move OUT (opposite to normal).

How to look for the chest indrawing:

1. The young infant must be calm and not breastfeeding; if present during cry or breastfeeding, this is not chest indrawing.
2. The young infant should not be bent at the waist.
3. Ask the caregiver to raise the child clothes above the chest
4. Look at the lower chest wall when the child breathes IN.
5. It must be clearly visible and present with every breath.
6. If you are unsure of the presence of chest indrawing, this is not chest indrawing.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home

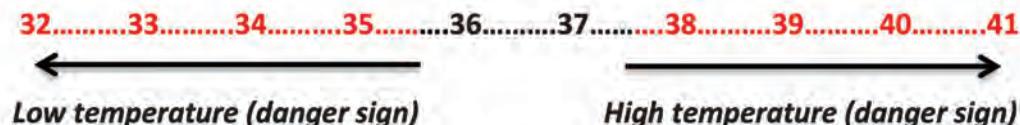
Component 3. Counselling on family health care practices. 1. Care-seeking practices

Measuring temperature

Mercury glass thermometer



Digital thermometer



Component 3. Counselling on family health care practices

Care-seeking practices

When to seek care (when to take the baby to a health facility)

Check for the presence of danger signs

Seventh sign: high or low body temperature

A healthy baby is never too cold or too hot.

If the baby has a severe infection, however, her/his body can become very cold or hot.

Low body temperature and high body temperature are both danger signs.

Keeping baby warm is an important to avoid lowering baby body temperature.

The best way to know the temperature is to measure it by a digital or mercury thermometer:

- o High body temperature = axillary temperature: 35.5 °C or more
- o Low body temperature = axillary temperature: 35.5 °C or less

If you do not have a thermometer feel the stomach or axilla (underarm) and feet to determine if the baby feels hot or unusually cool.

Check if a danger sign is present: if yes, counsel on urgent referral.

If not present, teach the mother on danger signs.

If you feel baby is cold it could be due to cold environment, warm the room, and put the baby in skin-to-skin contact, cover baby and mother with blanket and breastfeed the baby.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices

skin boils



pus coming from umbilicus



red skin around umbilicus



pus draining from eyes

Component 3. Counselling on family health care practices

Care-seeking practices

- When to seek care (when to take the baby to a health facility)

Check if a danger sign is present:
if yes, counsel on urgent referral.
If not present, teach the mother
the danger signs.

Check for the presence of danger signs

Eighth sign: signs of local infections

If baby has

- pus coming out of the umbilical stump
- red skin around the umbilicus
- skin boils filled with pus (look at the whole body including the back, armpits and groin)
- pus coming out of the eyes

These are signs of local infection and the baby must be referred to a health facility urgently.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home
Component 3. Counselling on family health care practices. 1. Care-seeking practices



Component 3. Counselling on family health care practices

I. Care-seeking practices

a. When to seek care (when to take the baby to a health facility)

1. Check for the presence of danger signs

Ninth sign: Small babies

- If the baby's weight is in the **green zone** of the scale (2.5 kg or more) your baby has a healthy weight.
- If the baby's weight is in the **yellow zone** (2.0 to 2.4 kg) of the scale your baby is small and needs to be urgently referred to a health facility.
- If the baby's weight is in the **red zone** of the scale (**less than 2.0 kg**) your baby is very small and could experience severe problems keeping warm, feeding and breathing and should be urgently referred to a health facility.

1. Show the mother the scale and tell her it will help to know if her baby is small and will need special care to stay healthy.
2. Place the weighing scale and the sling on a clean surface.
3. Adjust the knob to make sure that the scale reads ZERO when you hang the sling on it.
4. Ask mother to undress baby but to leave a hat, shirt and nappy on to ensure baby is warm. Reassure her that the weighing will be fast and baby will be dressed up again very soon.
5. Ask mother to lay baby on the sling. Attach sling to the scale and gently lift baby off the floor. You can do this over a soft bed.
6. Draw the sides of the sling up and attach sling to the hook on the scale.
7. Hold the top bar carefully, lift scale and sling with baby off the ground until the scale is at eye level.
8. Do not hold or touch baby from below as the weight will be incorrect.
9. When scale is fully extended and has stopped bouncing, read the scale at eye level. Look where the coloured inner zone of the scale meets the top of the outer case of the scale.
10. Look at the colour zone, read weight in kilograms to the nearest 0.1 kg.
11. Gently put sling and baby back down and unhook sling. Ask mother to take baby out of the sling. Encourage her to calm the baby.
12. Record the weight in kilograms on the recording form in the space provided and explain to the family what you found.

Remember that if there are any other danger signs do not waste time weighing the baby but refer her/him urgently to a health facility.

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 1. Care-seeking practices



Breastfeed more often

**Put the baby
into skin-to-skin
position**

Keep baby extra warm



Position the baby



Securely wrap
the baby



Put on loose clothing
over the wrap



Always wash hands carefully

Component 3. Counselling on family health care practices

I. Care-seeking practices

a. When to seek care (when to take the baby to a health facility)

1. Check for the presence of danger signs

Ninth sign: Small babies (2)

Small babies are most vulnerable during the first few days. Special care must start immediately.

Small babies have been born early or may not have grown well enough in the womb. They are more likely to become seriously ill or die than normal size babies and have problems such as:

- **Low temperature**

Small babies have little fat on their bodies and are often unable to maintain their temperature. They can get cold and sick easily. You need to keep small babies extra warm.

- **Feeding difficulties**

Small babies need breast milk to survive and grow but they have small stomachs, tire easily, may not have enough energy to suckle, and may not attach well to breast. They are at risk of not getting enough breast milk. You need to feed the baby very often to ensure the baby gets enough milk.

- **Infection**

Small babies may not have enough strength to fight disease and can get infections easily. Measures such as handwashing are essential to prevent infection.

- **Breathing**

Very small babies may have difficulty breathing because their lungs have not yet matured.

Check if a danger sign is present:
if yes, counsel on urgent referral.
If not present, teach the mother
on danger signs

If baby has any danger signs skip all other tasks and assist with referral

Caring for health and development of newborns and young infants less than two months at home
Component 3. Counselling on family health care practices. 1. Care-seeking practices

IF THE YOUNG INFANT HAS ANY DANGER SIGN, SKIP ALL OTHER TASKS AND ASSIST REFERRAL.



I. From whom to seek care

Component 3. Counselling on family health care practices

I. Care-seeking practices

b. From whom to seek care

- Trained health care providers should be the only trusted source of medical care.
- Do not seek care from untrained sources: they can cause harm to your baby instead of being of benefit. The baby may even die.

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 1. Care-seeking practices



Help to arrange transportation



Ask mother if she has savings



Take your baby timely to health facility

Overcome difficulties to take baby to a health facility

Component 3. Counselling on family health care practices

Care-seeking practices

From whom to seek care

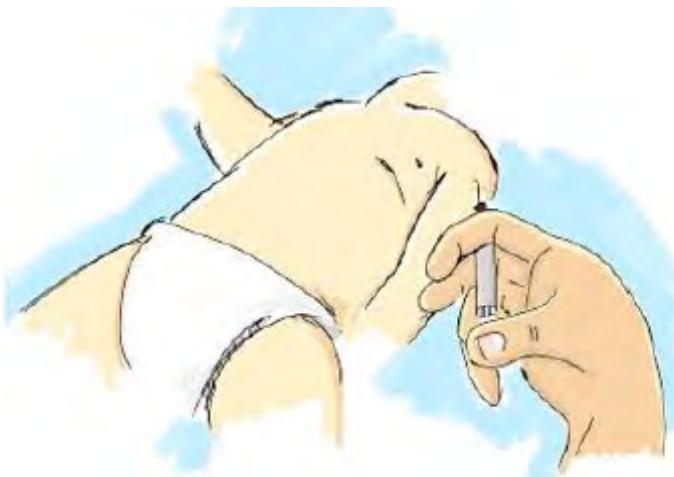
Use good communication skills to explain to families the importance of referral, to convince them and to solve problems.

Counsel them only on the referral difficulty that you identify. Do not talk about difficulties that are irrelevant.

Difficulties	Advice
If baby is sick and you do not seek care quickly baby may die	If baby is sick and you do not seek care quickly baby may die Timely care from a health facility where there are doctors, supplies and equipment can help sick babies get better Without treatment sick babies can easily get worse and die
There is no one to care for the other children or do daily tasks	If the baby does not get to a health facility it may risk her/his life. <ul style="list-style-type: none">• Would your husband stay with the other children in such a critical situation?• If not, ask who else (relatives or neighbours) can help with the children and daily tasks?• I can talk to your husband or help contact someone to help
Lack of transport	I will assist in finding means of transport
Lack of money	Do you have any savings. If not, I will help approach community committees or other members of the family
Family wants to take baby to a faith healer first	A baby showing danger signs needs urgent treatment in a health facility. Delaying treatment may make the baby's condition worse.
Mother is alone and she needs permission from husband or a family elder	I can help in contacting the person who can give permission to take the baby to a health facility.

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 2. Prevention practices



BCG



Hepatitis B



Oral polio

Component 3. Counselling on family health care practices

2. Prevention practices

Vaccination protects babies from serious illnesses and complications such as limb paralysis, brain damage, blindness and death.

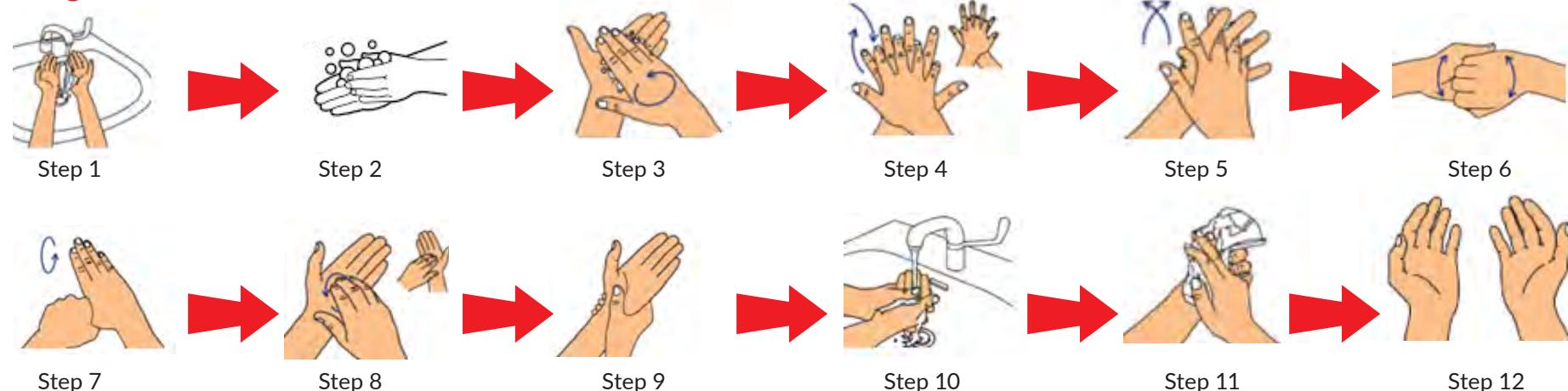
At birth babies should receive:

1. first dose of hepatitis B vaccine
2. oral polio vaccine
3. BCG vaccine.

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 2. Prevention practices

1. Washing hands



REMEMBER TURN OFF THE TAP WITH A TOWEL. NOT WITH YOUR HAND.



When to wash hands



Component 3. Counselling on family health care practices

2. Prevention practices: Hand washing

Hand washing helps prevent the spread of infections. It can prevent major childhood illnesses like pneumonia and diarrhoea, the most common killers of children under five.

Handwashing with soap removes germs from hands.

If houses don't have toilets with water supply and basin, advise and assist families to create a place within the home for hand washing. This should have a wash basin, a container for water, and soap (or a local substitute).

When should you wash hands?

- After changing diapers or cleaning up a child who has used the toilet;
- Before touching the baby;
- After using toilet;
- Before preparing food;
- Before eating;
- Before feeding a child;
- Before and after caring for someone who is sick;
- After blowing your nose, coughing, or sneezing;
- After touching an animal, animal feed, or animal waste;
- After touching garbage

How should you wash your hands?

1. Wet hands with water
2. Rub wet hands on soap, covering the hand with soap
3. Rub palms together
4. Rub back of each hand with the palm of the other hand keeping fingers interlaced
5. Rub palm to palm with the fingers interlaced
6. Rub back of the fingers with the fingers interlocked
7. Reach each thumb clasped in opposite hand using a rotational movement
8. Rub the tips of the fingers in the opposite palm using a circular movement
9. Rub each wrist with the opposite hand
10. Rinse the hands with water
11. Dry thoroughly with a clean towel

Remember to turn the tap off with a towel, not with your hands.

Caring for health and development of newborns and young infants less than two months at home

Component 3. Counselling on family health care practices. 2. Prevention practices



Use an insecticide-treated bednet to prevent malaria in high-risk areas



Antibiotics are only prescribed by health professionals



Don't take another person's antibiotics (neighbour, cousin, etc)



Don't purchase antibiotics from a pharmacy without a doctor's prescription



Don't give your child an old antibiotic present at home

Component 3. Counselling on family health care practices

2. Prevention practices

Use of insecticide-treated bednet for prevention of malaria in high-risk areas

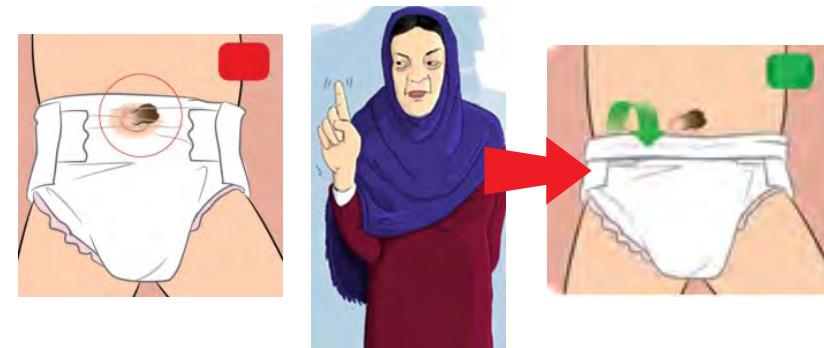
Malaria is a serious illness carried by mosquitoes. It is a major cause of death in children under five. Mosquitoes bite at night. You and your baby should sleep under an insecticide-treated bednet to prevent the serious effects of malaria.

Rational use of antibiotics

- Antibiotics kill microbes that cause disease and can save the lives of sick children.
- Different diseases require specific types of antibiotic which should only be prescribed by a trained health professional.
- If antibiotics are given to a baby who does not need them they can cause harm:
 - The microbe will get used to and resist the antibiotic. The baby will then need much stronger antibiotics which may affect the baby's health.
 - Unnecessary use of antibiotics can impair your child's development.
- Do not purchase antibiotics from the pharmacy without a doctor's prescription.
- Do not take old antibiotics found at home or given by a neighbour: the baby may not be in need of an antibiotic, s/he may not need this type of antibiotic, or the antibiotic could be old (expired).

Caring for health and development of newborns and young infants less than two months at home

Component 4. Counselling on caring for the umbilical cord stump



Don't cover umbilical cord stump with napkin, put it below

Component 4. Counselling for caring for the umbilical cord stump

The umbilical cord is a possible entry point for dangerous infection.

To care for it, apply chlorhexidine 4% on the stump every day for seven days. Use chlorhexidine **4% only** on the umbilical cord stump and never in the eyes. **It may cause blindness.**

Avoid using harmful traditional substances e.g. cow dung. These lead to serious infection and can cause the baby to die.

To care for the stump of the umbilical cord:

- wash your hands with soap and water;
- expose cord stump while keeping baby warm by skin-to-skin contact;
- clean cord stump off urine or bowel;
- apply chlorhexidine 4% gel/solution on top of stump as soon as the cord is cut, and spread it around the stump and on skin around it;
- let the cord fully dry in air before you dress the baby
- dress your baby in loose clothing;
- do not pull or tug at the cord stump;
- do not cover the cord stump by napkin or another thing;
- do not roll the cord stump.

Caring for health and development of newborns and young infants less than two months at home

Component 5. Counselling on caring for hygiene

Sponge bath before the umbilical cord stump falls off (1-2 weeks)



Prepare everything you need before you start



Baby lies on a hard surface



Soak a washcloth in warm water



Wrings out excess water



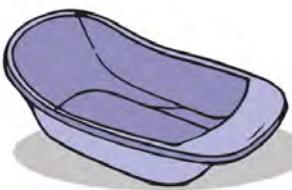
Expose only the part you are washing



Pay special attention to arm pit, behind ears and napkin area



Dry the baby quickly



Bathe in a small tub after the umbilical cord stump falls off: few amount of warm water, feet first, and dress quickly

Test water temperature by dipping your elbow

Component 5. Counselling on caring for hygiene

Element 1. Bathing a newborn

- Do not bathe the baby the day of delivery to avoid chilling (cold temperatures are dangerous for babies).
- Do not bathe babies every day because this will dry out their skin: every 2 or 3 days weekly is sufficient.
- Prepare everything you will need before you start bathing the baby.

Before umbilical cord stump falls off: sponge bath (1-2 weeks)

- Prepare washcloth, towels, diaper, and warm water in a basin (test temperature with your elbow).
- Baby should lie in a warm place on a flat surface (firm bed, counter, blanket on the floor).
- Undress baby and wrap in a towel to keep baby warm.
- Expose only the part of baby's body you will be washing.
- Wet washcloth, wring out excess water and wipe baby's face, cleaning the eyes from inner to outer angle.
- Pay special attention to creases under arms, behind the ears, around neck, the diaper area and between the fingers and toes.
- Dry the baby and dress quickly, to avoid chilling.

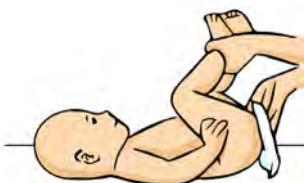
After umbilical cord stump falls off: bath tub (second or third week)

- Bathe the baby before feeding, to avoid spitting in the tub.
- Bathe the baby in a tub with a small amount of warm water, to avoid any chance of drowning,
- Pour warm water over her/his body throughout the bath, to keep baby warm,
- Hold the head and neck with the non-dominating arm and guide baby into the tub, feet first, with your other arm.
- Start with the face and move to the dirtier parts of the body.
- When finished, take the baby out of the tub and dry her/him quickly. S/he can easily chill.

Caring for health and development of newborns and young infants less than two months at home

Component 5. Counselling on caring for hygiene

Clean the diaper area



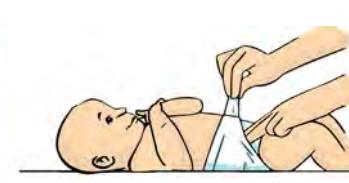
Wipe bottom with a damp cloth
For girls, clean genitals from
front to back
For boys, gently rinse with water



Give baby some diaper-free
time to air the skin to prevent
rash



Put on a new diaper



Fasten the diaper



Dress your infant



Wash your hands



Trim your baby's nails



Use cotton wool ball and warm water to clean baby's eyes.
Wipe gently from inside to the outside



Clean your baby's nose

Component 5. Counselling on caring for hygiene

Remember always to wash your hands before doing anything to your baby and after changing the diapers.

1. Keep your baby's face, neck, hands and diaper area always clean frequently every day

- Wash regularly with a soft damp cotton cloth, and then dry.
- Change diapers at regular intervals, clean baby's bottom and keep dry to avoid diaper rash.

2. Trim your baby's fingernails

- Always keep your baby's fingernails clean: dirty nails contain germs that can cause disease when babies suck their hands.
- Always keep your baby's fingernails trimmed: if they are sharp and long, babies can scratch and hurt themselves
- The best time to trim your baby's nails is when s/he is asleep.
- Use appropriate clippers to cut your baby's nails and don't trim deep to avoid hurting the baby.

3. Keep your baby's nose unclogged

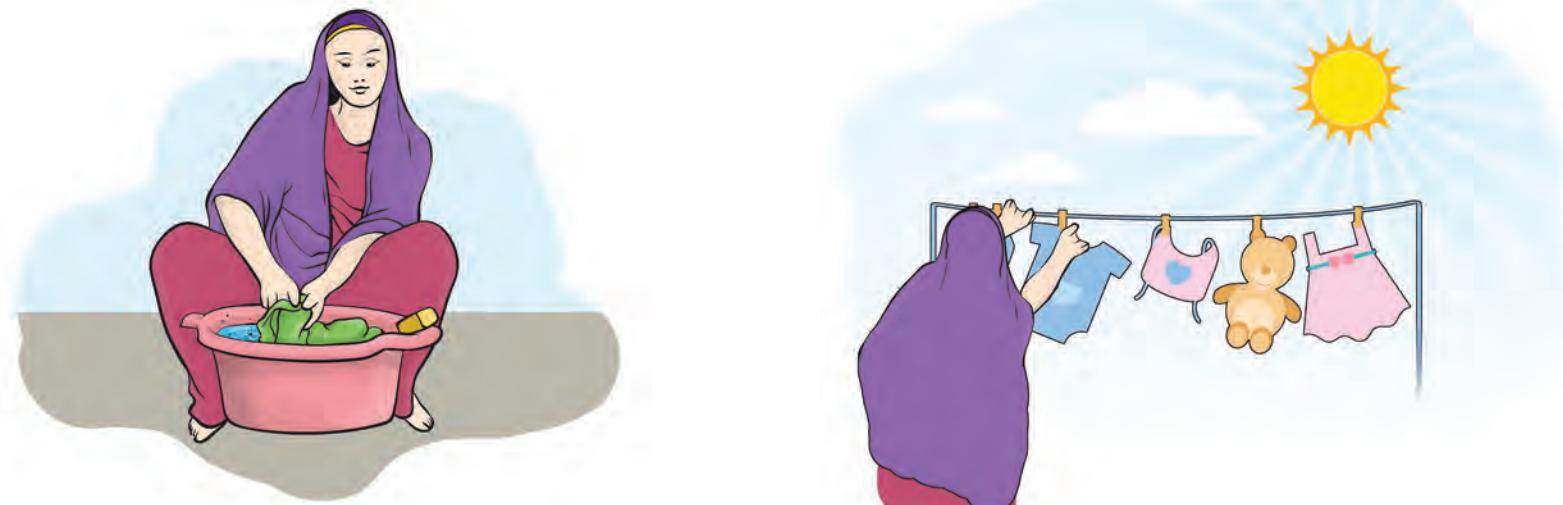
- Clean the dried mucus deposit in baby's nose gently with a damp soft cotton cloth.

4. Clean your baby's eyes

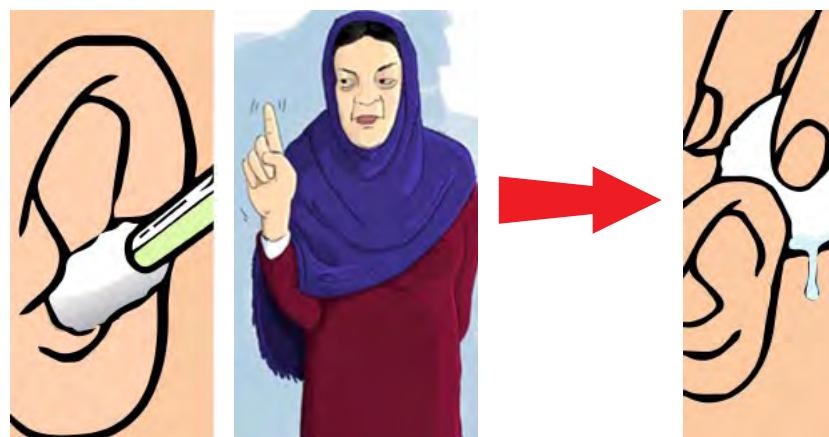
- Clean eyes to prevent eye infection. Gently remove dried mucus with a soft damp cloth.
- Moisten a cotton wool ball with warm water and gently clean your baby's eyelids, wiping from inner to outer corner of the eye.
- Use a different piece of cotton wool for each eye.

Caring for health and development of newborns and young infants less than two months at home

Component 5. Counselling on caring for hygiene



Wash your baby's clothes and toys and hang them in the sun, it helps to kill germs.



Never insert cotton ear buds into baby's tiny ears. It can damage the ear drum.

Component 5. Counselling on caring for hygiene

Remember always to wash hands before doing anything to the baby and after changing diapers.

6. Cleaning baby's ears

- Clean ears gently, using a cotton wool ball to wipe behind and around the ears.
- If anything comes out of the ear, gently remove it from outside: never insert cotton earbuds into baby's tiny ears. They can damage the eardrum.

7. Keep baby's clothes clean

- Wash your baby's clothes regularly to remove substances and dust that may irritate your baby's delicate skin.
- Hang clothes in the sun. This helps kill germs.

8. Sanitize the home

- Home should be kept clean to limit exposure to harmful germs and microbes.
- Keep your home free of flies and mosquitoes to avoid diarrhoea and malaria, and let the baby sleep under a bednet.
- Clear your house of dust, remembering that dusting should not happen close to the baby: dust contains many microorganisms, has allergic properties and can irritate your baby's breathing.
- Ask family members not to smoke inside house.

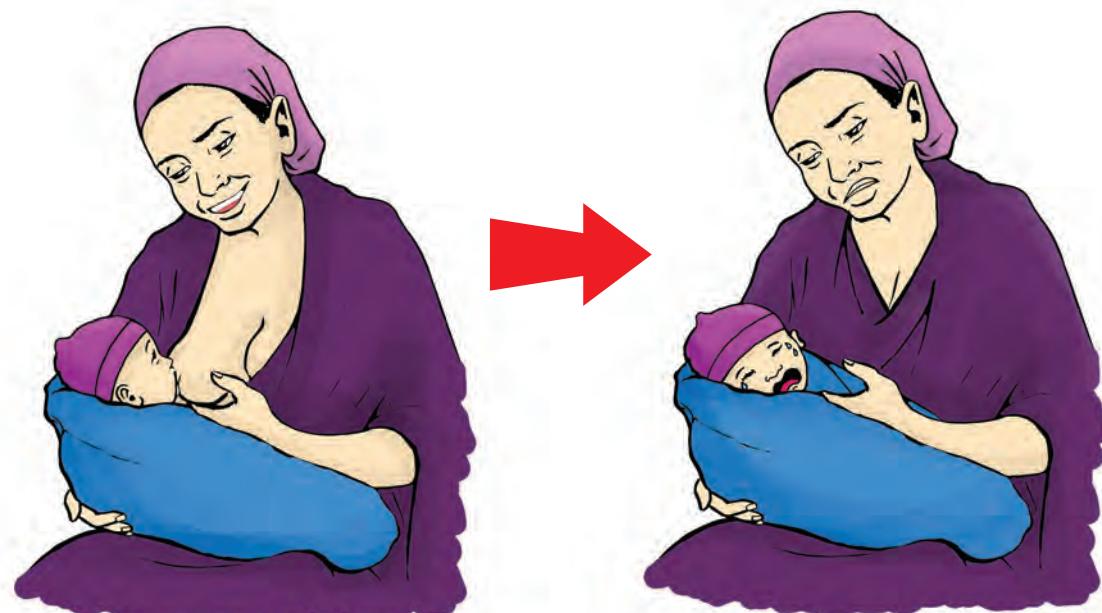
Caring for health and development of newborns and young infants less than two months at home

Component 6. Counselling on nutrition

Breastfeeding problems



Frequent breastfeeding and the emptying of breasts will lead to more milk production



Let baby breastfeed until s/he leaves the breast alone to take fore-and hind-milk. Make sure that the baby is well attached and well positioned.

Component 6. Counselling on nutrition (breastfeeding)

Breastfeeding problems

Not enough milk

- Immediately after delivery milk comes in small quantities, enough for baby's requirements. Suckling produces more milk. Bad attachment will lead to ineffective suckling.
- Good attachment leads to effective suckling, and emptying the breasts will lead to more milk production. As the breasts are emptied, more milk is produced.
- There is no need for other foods or fluids. Breast milk contains all the nutrients babies need. When baby is given other foods or fluids, the tiny stomach will only accommodate a small amount of breast milk. Breasts will not be emptied leading to production of smaller amounts of breast milk. Frequently breastfeed your baby exclusively.
- Breastfeed on demand. Frequent suckling and the emptying of breasts leads to the production of more breast milk.

Counsel only according to the problem identified.

Ask permission to observe the breastfeed to make sure that attachment is good.

If mother complains of weak milk, ask her to breastfeed, express milk at the beginning of the breastfeed, and express again a little later. Show the mother the difference in colour and explain the difference between fore- and hind-milk.

Weak milk

The milk at the beginning of the breastfeed (fore-milk) is transparent, you may think it is weak.

There is no weak milk, breast milk of all mothers contain all nutrients baby needs, according to baby's age.

- Fore-milk: transparent milk at the beginning of breastfeed. It contains all the water that baby needs and important nutrients.
- Hind-milk: thick white milk at the end of breastfeed. It contains fat and other nutrients.

Baby cries after breastfeeding and is still hungry

- You may be putting your baby on one breast and then moving her/him too quickly to the other breast. Baby will not take hind-milk, and will not reach satiety. The fat content of hind-milk makes the baby feel full.
- You should not move the baby from the breast until s/he leaves it, so the baby can take both fore- and hind-milk.
- If the baby is not well positioned and well attached, s/he may not get enough breast milk and will remain hungry.
- Breastfeed your baby on demand, so the baby will get the needed nutrients and more milk will be produced.

Caring for health and development of newborns and young infants less than two months at home

Component 6. Counselling on nutrition



Exclusive breastfeeding allows baby to grow and develop healthier and will increase milk production



Breast milk contains all the water baby needs
Drink water yourself and breastfeed the baby frequently

Component 6. Counselling on nutrition (breastfeeding)

Breastfeeding problems

Not exclusively breastfeeding

Breast milk contains all nutrients baby needs. There is no need to give other foods or fluids to the baby. Exclusive breastfeeding allows baby to obtain all nutrients necessary for healthy growth and development.

Baby's stomach is tiny, but can accommodate the small amount of milk needed for her/him.

Filling stomach with foods/fluids or water, will reduce amount of breast milk s/he takes and baby will not take all the nutrients s/he needs.

Giving baby water in hot weather

Besides nutrients, breast milk contains all water baby needs in its fore-milk, even for hot weather. You can drink water and breastfeed the baby frequently to obtain all water s/he needs.

Not feeding on demand/ infrequent breastfeeding/baby does not seem hungry

When you breastfeed your baby on demand, s/he will get the nutrients the baby needs, and more milk will be produced. Let us see signs of hunger of the baby before crying. Breastfeed your baby while s/he is hungry.

Pain in breastfeeding

Poor attachment leads to pain in breastfeeding. It may also lead to engorged breast or cracked nipple. Let us now try to correct the positioning and attachment.

Breastfeed frequently and on demand to relieve engorgement of the breast. You may also express the breast milk. If this does not work, you have to go to a health facility. If you have a cracked nipple: you need to go to a health facility.

Baby is given formula/mother is not breastfeeding

Your baby will not grow faster and healthier on artificial milk. Breast milk is more advantageous even if artificial milk is easier and faster.

Counsel only according to the problem identified.

Ask permission to observe the breastfeed to make sure that attachment is good.

Advise mothers on the advantages of breastfeeding and disadvantages of artificial milk.

Caring for health and development of newborns and young infants less than two months at home

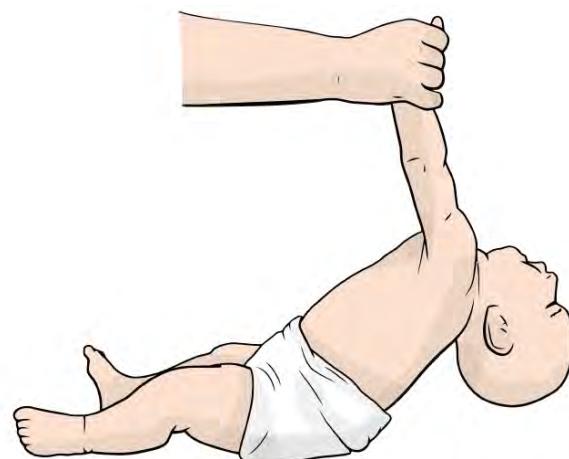
Component 7. Counselling on developmental milestones



Baby at this age sleeps most of the time



Babies often take a position similar to the fetal position during the last months of pregnancy



Baby cannot support her/his head due to weak neck muscles

Component 7. Counselling on developmental milestones

Sleeping:

- During the first week, the baby spends most of the time sleeping, the baby sleeps between 14 and 17 hours, each day.
- When the baby sleeps well, give the baby energy and s/he will be active.
- As long as the baby breastfeeds well, and moves her/his limbs, you should not worry about the amount the time the baby sleeps. Babies move her/his limbs in jerky uncontrolled movements.

Crying:

- Crying is the main way your newborn communicates. When the baby cries s/he is telling you what s/he needs: I am hungry, I am in pain, I want to sleep, I am disturbed by my wet diaper.
- Your baby cries less when s/he reaches three to four months.
- If your baby cries for a long time and nothing seems to comfort her/him. It is often a sign of colic.

Position:

- When the baby lies on the back, her/his fists are clenched, elbows bent, hips and knees flexed, and arms and legs held close to the front of the body, s/he is adopting the position s/he had when s/he was a fetus in your tummy.
- When the baby is in a prone position, s/he cannot raise her/his hand or extend the limbs.
- Newborn babies cannot support their heads, because neck muscles are weak. You should support baby's head to avoid any harm to the brain.

Hearing:

- Babies hear well and will turn their heads in the direction of any noise that startles them.

Vision:

- Newborns' eyesight is fuzzy but they can see faces clearly at 25 cm, and often stare at them.

Caring for health and development of newborns and young infants less than two months at home
Component 7. Counselling on developmental milestones. How to relieve colic



Positions to hold a baby to relieve colic

Component 7. Counselling on developmental milestones

Relieving a colicky baby

If the baby is crying because of colic:

- Make sure the baby is positioned properly during feeding. This will reduce amount of air the baby takes in.
- Limit external stimulation. Keep the baby in a quiet calm place, lower the lights, reduce noise around the house, and speak or sing softly to your baby.
- Medicines for colic are not recommended. They can be harmful.
- The best way to comfort a crying baby is to hold her/him close, move gently, and apply gentle pressure on the abdomen.
- Walk the baby kangaroo-style. With your baby facing either in or out, walk baby around the house or, if weather permits, outside.
- Hold her/him in the “colic carry”. Position your baby so that her/his stomach rests on your forearm and the head is supported in the palm of your hand or the crook of your arm.
- Lay her/him across your lap and gently rub her/his back to help release gas.
- Try swaddling her/him. Some babies respond well to being wrapped tightly, especially when being rocked.
- Rock your baby in your arms. The steady rhythm of the movement is soothing.
- Pedal baby’s legs. With your baby on her/his back, gently move her/his legs in a pedaling motion to help release gas.
- Put a warm water bottle on your baby’s tummy.
- Try changing your own diet by eliminating dairy products, caffeine, onions, cabbage, broccoli, garlic, and spicy foods.

Caring for health and development of newborns and young infants less than two months at home
Component 7. Counselling on developmental. Burping a baby



Over your shoulder



Sitting on your lap



Face down across your lap

Component 7. Counselling on developmental milestones

Burping a baby

When the baby feeds, bubbles of air can get trapped in her/ his stomach. These bubbles can make the baby uncomfortable and grizzly. You can help baby free up room in her/his tummy, s/he can settle and feed for longer, by burping. There is no rule that you must burp your baby after every feed.

Burp your baby if she/he:

- often brings up a little milk after feeds (posseting)
- is colicky
- has reflux.

There are three ways to burp a baby

1. Over your shoulder

- Hold your baby so that her/his chin is resting on your shoulder.
- Support the baby's bottom with your hand.
- Gently rub and pat the baby's back with your other hand.

2. Sitting on your lap

- Sit the baby on your lap facing away from you.
- Use one arm to support the baby's body, the palm of your hand supporting the chest while your fingers gently support the chin and jaw. You should keep your fingers away from baby's throat.
- Lean baby slightly forwards and gently pat or rub baby's back for a while with your free hand.

3. Face down across your lap

- Lie your baby face down on your legs, at a right angle to your body so the baby is lying across your knees.
- Support baby's chin and jaw with one hand.

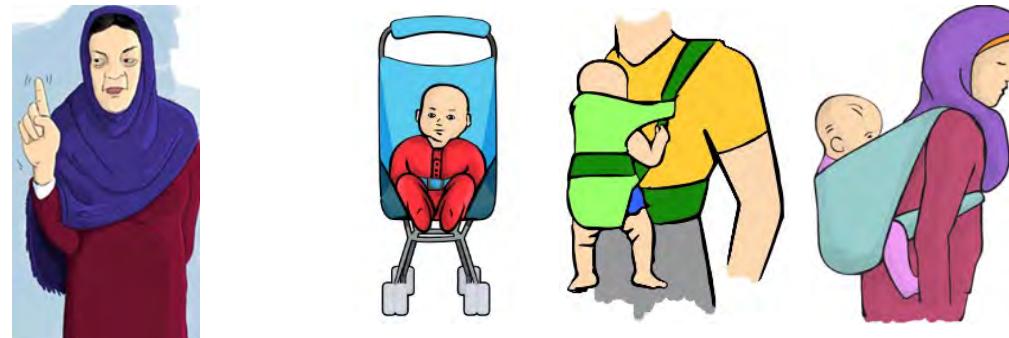
Caring for health and development of newborns and young infants less than two months at home

Component 7. Counselling on developmental milestones

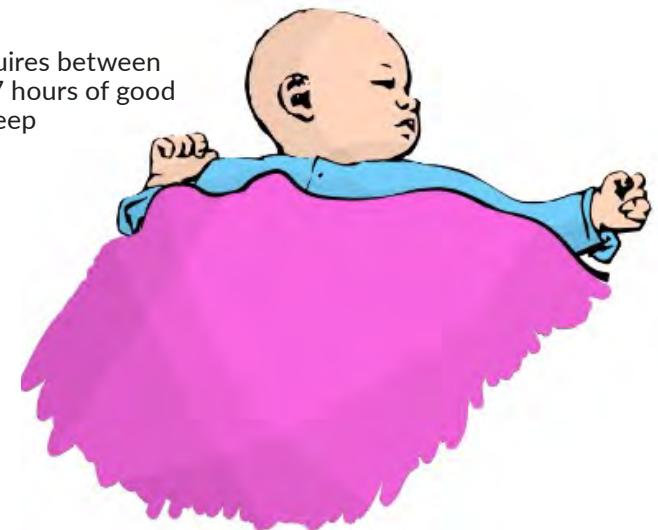


Physical activity is essential for a baby's healthy growth and development

Baby requires between 14 and 17 hours of good quality sleep



Don't restrain your baby's movement for more than one hour at a time



Component 7. Counselling on developmental milestones

Effect of physical activity and good quality sleep and reduction to maximum of sedentary life on baby's healthy growth and development

Physical activity

- Make physical activity routine in your baby's life. At least 30 minutes of physical activity – more is better – should be spread over the day.
- Abduct, adduct, extend and flex babies' limbs.

Reduce sedentary restraining time

- Do not restrain your baby, in prams/strollers, strapped on your back or overwrapped, for more than one hour at a time.
- Restraining babies reduces communication with other family members leading to language delays and reduced attention span.
- Minimize sedentary hours by talking, singing and touching baby.

Good quality sleep

- Good quality sleep plays an essential role in baby's growth and development. At this age, your baby requires 14–17 hours a day of good quality sleep, including naps.
- Good quality sleep provides the energy babies need to be active. A well-rested baby is an active baby.
- Offer your baby a regular, routine and calm environment for sleeping. This helps baby transition to sleep.
- Keep electronic screens out of babies' bedrooms.

Caring for health and development of newborns and young infants less than two months at home

Component 7. Counselling on developmental milestones



Play: provide ways to see, hear and move arms and legs freely

NEWBORNS



Communicate with your baby: Talk and sing to your baby



Play with your baby: provide ways for her/him to see, hear and feel



Communicate with your baby: Look into baby's eyes and talk and sing to your baby smile and laugh with your baby



Move colourful objects in front of your baby's eyes

Component 8. Counselling on care for development (play and communicate with the child)

Stimulating the baby's development is not only the responsibility of the mother: all members of the family should contribute, by playing and communicating with the baby from birth. The way the whole family interacts with the baby and later during childhood, affects the kind of adult s/he will become.

Newborns can hear and see at birth and want to communicate with other people.

There are many opportunities to play and communicate with your baby, such as breastfeeding, dressing and other daily tasks.

Breastfeeding is an excellent opportunity: when you and your baby are very close. The baby sees your face and loves to respond to your smiles and sounds. You both communicate by responding to the slightest movement and sound, even smell.

The baby becomes "attached" to the person who consistently responds to her/him, holds and loves her/him, and helps her/him feel safe (by responding when s/he cries). This bond lasts a lifetime.

Age	Play activity	Communication activity
Newborns	Provide ways for your baby to see, hear, move arms and legs freely, and touch you. Gently soothe, stroke and hold your child. Skin-to-skin contact is good.	Look into your baby's eyes, talk and sing to your baby from birth. When you are breastfeeding is a good time to do this.
Between 1 and 2 months	Let the baby hear, see, feel, move freely and touch you. Move colourful objects in front of the baby's eyes to help her/him learn to follow and to reach out.	Look into infant's eyes and talk to her/him. Smile and laugh. Get a conversation going by copying the baby's sounds and gestures.

Caring for health and development of newborns and young infants less than two months at home

Component 8. Counselling on prevention of accidents and injuries



**Don't sleep in same bed as baby
this may cause suffocation**



Baby should sleep in a separate bed



If a baby is choking

Sit down and lay the baby's face down along your thighs, supporting the baby's head with your hand
Give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades



Remove bibs before sleeping

Component 9. Counselling on prevention of accidents and injuries

Choking

Choking is a common cause of injury and death in young children. Their small airways are easily obstructed.

If a baby is choking:

- Sit down and lay the baby's face down along your thighs, supporting the head with your hand.
- Give up to five sharp back blows with the heel of your hand between the baby's shoulder blades.

Causes of choking and suffocation in newborns:

- Poor attachment to the breast can cause choking.
- The ribbons used to tie bibs around the baby's neck, or pacifier's ribbon attached to clothes.
- Remove bibs and pacifiers (which are not recommended for babies) before sleeping.
- Babies that sleep in the same bed as their parents are at a risk of suffocation. Parents can roll onto babies during sleep, and babies can get tangled in the sheets or blankets. Your baby needs a separate bed, with no siblings or parents.

Observe breastfeeding and correct positioning and attachment.

Caring for health and development of newborns and young infants less than two months at home
Component 8. Counselling on prevention of accidents and injuries

Suffocation



Don't smoke at home. This may cause suffocation.



Smoke inside the home may cause suffocation

Component 9. Counselling on prevention of accidents and injuries

Suffocation

Smoke inside the house may cause suffocation. It irritates baby's lungs. If you must use charcoal or wood for cooking do it outside the house.

Tobacco smoke

- Causes lung irritation and may lead to suffocation. Tobacco smoking harms those who smoke and those who inhale the cigarette smoke passively.
- The smell of tobacco smoke remains on clothes and bodies, and irritates the lungs. It is better for the health of the whole family not to smoke tobacco.
- Keep baby away from smokers and places where people smoke.
- Do not smoke inside your home or car, or anywhere near the baby, even when you are outside.
- If you have been exposed to smoke, take a shower and change clothes before touching baby.

Pillows, stuffed toys and blankets

- Babies cannot raise their heads and needs special protection from suffocation. If your baby sleeps face down on a soft surface s/he can suffocate.
- Keep baby's bed clear of stuffed toys and soft pillows. Always place the baby on her/his side to sleep during naps or at night.

Caring for health and development of newborns and young infants less than two months at home

Component 8. Counselling on prevention of accidents and injuries

Wounds, falls and burns



Don't leave things on the ground. Family member will fall, baby as well.

Don't put pins attached to baby's clothes.



Trim your baby's nails



Test water for baby bathing by dipping your elbow



Don't carry baby with a hot drink in your hand

Component 9. Counselling on prevention of accidents and injuries

Falls

- Never leave toys or other objects on the ground, or leave the ground slippery. Family members can fall while carrying the baby, and the baby can be harmed. Always keep the house tidy, with everything in its place.
- Never leave babies unattended on high surfaces. They may fall.

Wounds

- Never leave pins attached to your baby's clothes, they may open and injure the baby. If necessary, use safety pins.
- Trim baby's fingernails regularly. If they are long and sharp they can cause cuts and scratches.

Burns

- Using hot water to bathe the baby may scald her/him. Test water with your elbow before bathing the baby.
- Never carry your baby while cooking or washing next to containers with boiling water, or while carrying a hot drink. You should keep the baby in a safe place, where s/he can be seen, when you are doing the chores or drinking hot liquid.
- Avoid direct sunlight when it is very hot. Baby can get sunburn.

Caring for health and development of newborns and young infants less than two months at home

Component 9. Counselling on prevention of accidents and injuries



Skin-to-skin contact



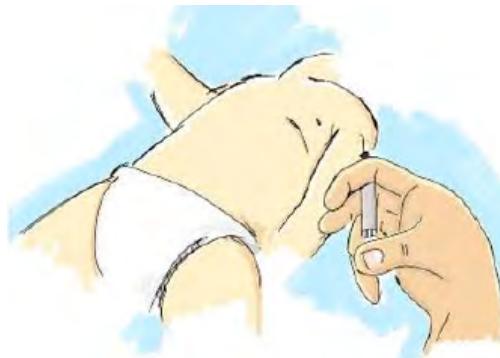
Breastfeeding the child



Consoling the baby when s/he cries



Early care-seeking



Immunize the child



Play and communicate with your baby

Component 10. Counselling on prevention of maltreatment, neglect and violence

Maltreatment and neglect negatively impact on brain development during infancy and early childhood, and on the child's subsequent physical, cognitive, emotional and social growth.

Measures to prevent neglect and maltreatment:

Emotional development and nutrition

- Skin-to-skin contact: your baby feels secure and protected in the skin-to-skin position.
- Breastfeeding provides the best food for your baby and creates a strong bond between mother and baby.
- Pick up your baby when s/he cries. This signals to the baby that s/he is safe and you are a caring, responsive mother that loves her/him. This positively affects baby's emotional development.
- Do not discriminate between boys and girls or between siblings in breastfeeding, playing and communicating, or in timely care-seeking. Discrimination negatively affects baby's future development.

Nurturing

- Playing and communicating with your infant stimulates the psychosocial development of your baby.

Health

- Immunizing your baby prevents illnesses.
- Seeking care from a qualified health care provider when your baby does not feel well.
- Rational use of antibiotics: only give prescribed treatment; never administer old opened antibiotics.
- Ensure your baby is clean and has clean clothes. It is an essential part of taking care of her/his hygiene.

Shelter and safe living conditions

A home where your baby is safe from harm, surrounded by a family giving her/him love, attention, and opportunities to learn, and where other siblings are well treated will have a lasting positive effect on the baby's social, emotional and cognitive development.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 1. Counselling on family health care practices. 1. Care-seeking practices.

When to seek care. Checking for presence of danger signs



Unable to breastfeed



Convulsions



Vomits everything

Component 1. Counselling on family health care practices

1. When to seek care: checking for the presence of danger signs

When to seek care and take the baby to a health facility

Check for the presence of danger signs. These are signs that, if they appear in the baby, indicate a critical condition. If any of these signs is present, the baby needs to be urgently referred to a health facility.

First sign: unable to breastfeed, or stops breastfeeding well

If baby is too weak to suckle and does not breastfeed at all, or the baby may have started out breastfeeding well but has now stopped.

Second sign: convulsions

Baby's arms and legs become stiff. The baby may stop breathing and become blue. There could be a recurring movement of one part of the body, such as twitching of the mouth or blinking of the eyes.

Third sign: vomits everything

If your baby is not able to hold down anything at all. All that goes down comes back up.

If your baby vomits several times but can hold down some fluids, this is not a danger sign.

Give information as listed in the recording form.

Get permission to check the baby.

Remember to wash your hands before touching the baby.

Check if any danger sign is present. If yes, counsel on urgent referral. If not present, teach the mother the danger signs.

If the mother says the baby is unable to breastfeed, or if you are in doubt, check by asking the mother to breastfeed her baby.

For convulsions, first ask the mother if the infant has had convulsions, and check if infant is convulsing now.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of infants aged 2 months up to 6 months at home

Component 1. Counselling on family health care practices. 1. Care-seeking practices.

When to seek care. Checking for presence of danger signs



Difficult breathing



Use a timer to count breaths

Component 1. Counselling on family health care practices

1. Care-seeking practices

When to seek care: checking for the presence of danger signs

Fourth sign: fast breathing

Babies breathe faster than older infants and children, if you notice your baby is breathing more quickly than normal or that there is difficulty in breathing, this could denote a serious health condition. You need to take the baby urgently to a health facility.

Is the baby fast breathing?

Use a timer to count respiratory rate.

Counting respiratory rate

1. Wait for baby to be calm or sleeping. Do not count when baby is breastfeeding or crying, otherwise the count will be incorrect.
2. Make sure there is enough light to see the breathing movements.
3. Gently lift the baby's shirt so you can see breathing movements.
4. Watch a few breaths until you are sure when the baby is breathing in and out.
5. Start the timer and count breaths for one full minute (until the long beep that marks the end of one minute).
6. If you counted 50 breaths or more, do not repeat the count. The baby has fast breathing.

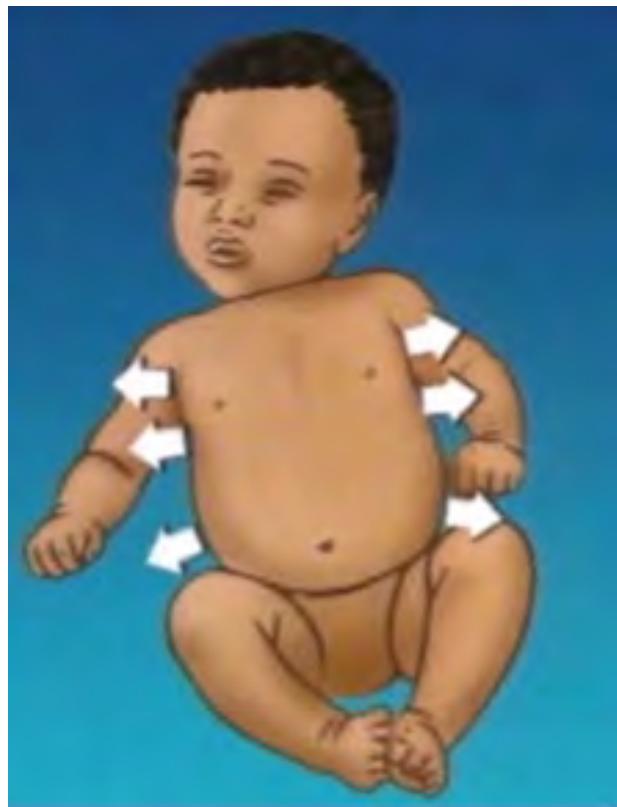
If the baby is fast breathing, urgently refer to a health facility.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of infants aged 2 months up to 6 months at home.

Component 1. Counselling on family health care practices. 1. Care-seeking practices.

When to seek care. Checking for presence of danger signs



Normal child: when child breathes in upper and lower chest walls and abdomen **go out**



Severe chest indrawing: when child breathes in upper chest wall and abdomen **go out** while lower chest wall **goes in**

Component 1. Counselling on family health care practices

1. Care-seeking practices

When to seek care: checking for the presence of danger signs

Fifth sign: severe chest indrawing

If your baby is breathing with difficulty and you find a very deep groove between the chest and abdomen. This is a danger sign, and the baby has a serious condition and should be taken urgently to a health facility.

Teach the danger signs

Chest indrawing is the groove formed between the chest and abdomen because of the lower chest wall going in when the child breathes in, and the upper chest and abdomen moving out.

How to recognize chest indrawing:

1. Wait for the child to be calm (these movements during crying or breastfeeding are not chest indrawing).
2. The child should not be bent at the waist.
3. Ask the caregiver to raise the child's clothes above the chest.
4. Look at the lower chest wall when the child breathes in. It must be clearly visible and present with every breath.
5. If you are unsure of the presence of chest indrawing, then, decide it is not chest.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of infants aged 2 months up to 6 months at home

Component 1. Counselling on family health care practices. 1. Care-seeking practices.

When to seek care. From whom to seek care

IF THE YOUNG INFANT HAS ANY DANGER SIGN, SKIP ALL OTHER TASKS AND ASSIST REFERRAL.



b. From whom to seek care

Component 1. Counselling on family health care practices

2. Care-seeking practices

From whom to seek care

Trained health care providers should be the only trusted source of medical care.

Do not seek care from other untrained sources, they can cause harm to your baby instead of being of benefit.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of infants aged 2 months up to 6 months at home.

Component 1. Counselling on family health care practices. 1. Care-seeking practices.

When to seek care. From whom to seek care



Help to arrange transportation



Ask mother if she has savings



Take your baby quickly to health facility

Overcome difficulties to take young infant to a health facility

Component 3. Counselling on family health care practices

3. Care-seeking practices

From whom to seek care

Use good communication skills to explain to families the importance of referral, to convince them and to solve problems.

Counsel them only on the referral difficulty that you identify Do not talk about difficulties that are irrelevant.

Difficulties	Advice
Fear that the health facility is a place where babies often die	If baby is sick and you do not seek care quickly baby may die Timely care from a health facility where there are doctors, supplies and equipment can help sick babies get better Without treatment sick babies can easily get worse and die
There is no one to care for the other children or do daily tasks	If the baby does not get to a health facility it may risk her/his life. <ul style="list-style-type: none">• Would your husband stay with the other children in such a critical situation?• If not, ask who else (relatives or neighbours) can help with the children and daily tasks?• I can talk to your husband or help contact someone to help
Lack of transport	I will assist in finding means of transport
Lack of money	Do you have any savings. If not, I will help approach community committees or other members of the family
Family wants to take baby to a faith healer first	A baby showing danger signs needs urgent treatment in a health facility. Delaying treatment may make the baby's condition worse.
Mother is alone and she needs permission from husband or a family elder	I can help in contacting the person who can give permission to take the baby to a health facility.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 1. Counselling on family health care practices. II. Prevention practices



DPT (diphtheria, pertussis, tetanus), Hib, hepatitis B



Polio

Component 1. Counselling on family health care practices

2. Prevention practices

Vaccination

It is the best way you can protect your infants' health from serious illnesses and complications such as paralysis of limbs, brain damage, blindness and death.

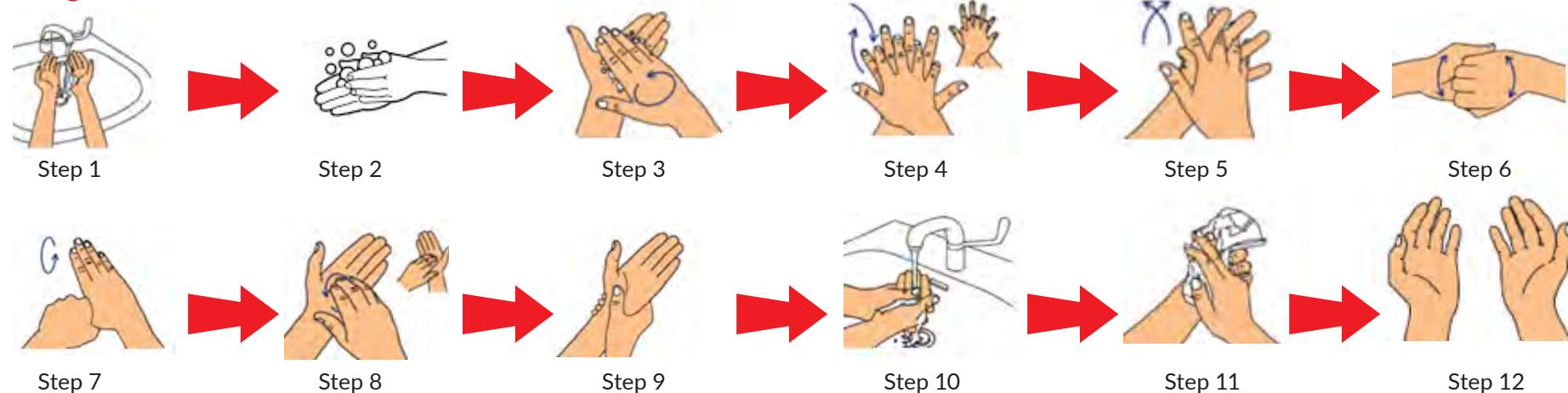
Young infants during this age should receive two doses of:

- Polio vaccine
- DPT (diphtheria, pertussis, tetanus)
- Hepatitis B vaccine
- Hib vaccine

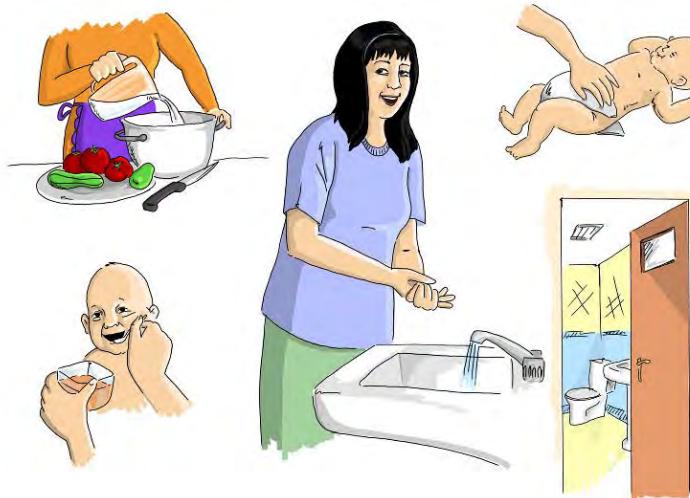
Caring for health and development of infants aged 2 months up to 6 months at home

Component 1. Counselling on family health care practices. II. Prevention practices

1. Washing hands



REMEMBER TURN OFF THE TAP WITH A TOWEL, NOT WITH YOUR HAND.



When to wash hands



Component 1. Counselling on family health care practices

2. Prevention practices

Hand washing helps prevent the spread of infections. It can prevent major childhood illnesses like pneumonia and diarrhoea, the most common killers of children under five.

Handwashing with soap removes germs from hands.

If houses don't have toilets with water supply and basin, advise and assist families to create a place within the home for hand-washing. This should have a wash basin, a container for water, and soap (or a local substitute).

When should you wash hands?

- After changing diapers or cleaning up a child who has used the toilet;
- Before touching the baby;
- After using toilet;
- Before preparing food;
- Before eating;
- Before feeding a child;
- Before and after caring for someone who is sick;
- After blowing your nose, coughing, or sneezing;
- After touching an animal, animal feed, or animal waste;
- After touching garbage.

How should you wash your hands?

1. Wet hands with water
2. Rub wet hands on soap, covering the hand with soap
3. Rub palms together
4. Rub back of each hand with the palm of the other hand keeping fingers interlaced
5. Rub palm to palm with the fingers interlaced
6. Rub back of the fingers with the fingers interlocked
7. Reach each thumb clasped in opposite hand using a rotational movement
8. Rub the tips of the fingers in the opposite palm using a circular movement
9. Rub each wrist with the opposite hand
10. Rinse the hands with water
11. Dry thoroughly with a clean towel

Remember to turn the tap off with a towel, not with your hands.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 1. Counselling on family health care practices. II. Prevention practices



Use an insecticide-treated bednet to prevent malaria in high-risk areas



Antibiotics are only prescribed by trained health professionals



Don't take another person's antibiotic present at another person (neighbour, cousin, etc)



Don't purchase antibiotics from a pharmacy without a doctor's prescription



Don't give your child an old antibiotic present at home

Component 1. Counselling on family health care practices

2. Prevention practices

Use insecticide-treated bednet to prevent malaria in high-risk areas

Malaria is a serious illness carried by mosquitoes. It is a major cause of death in children under five. Mosquitoes bite at night. You and your baby should sleep under an insecticide-treated bednet to prevent the serious effects of malaria.

Rational use of antibiotics

- Antibiotics kill microbes that cause disease and can save the lives of sick children.
- Different diseases require specific types of antibiotic which should only be prescribed by a trained health professional.
- If antibiotics are given to a baby who does not need them they can cause harm:
 - The microbe will get used to and resist the antibiotic. The baby will then need much stronger antibiotics which may affect the baby's health.
 - Unnecessary use of antibiotics can impair your child's development.
- Do not purchase antibiotics from the pharmacy without a doctor's prescription.
- Do not take old antibiotics found at home or given by a neighbour: the baby may not be in need of an antibiotic, s/he may not need this type of antibiotic, or the antibiotic could be old (expired).

Caring for health and development of infants aged 2 months up to 6 months at home
Component 1. Counselling on family health care practices. II. Prevention practices



Component 1. Counselling on family health care practices

2. Prevention practices

Boil water and clean cups and spoons

You should breastfeed your baby and avoid artificial milk. Breast milk is the best food for your baby.

If for any reason you cannot breast feed use a cup and spoon to feed your baby and make sure they are cleaned thoroughly.

- Boiling water kills microorganisms such as bacteria, viruses and protozoans that can cause disease.
- Boiling makes tap water microbiologically safe.
- Bring water to a full rolling boil, let it boil for one minute, then let it cool before using.

Give this advice if there is no safe water in the area and/or there are reasons for the mother not to breastfeed. Advise on boiling bottle and water to kill organisms, and let water and bottles cool before using them.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 2. Counselling on nutrition (breastfeeding)

Breastfeeding keeps your baby healthy and helps her/his development



Artificial milk increases the risk of infections and likelihood of dying



Component 2. Counselling on nutrition (breastfeeding)

Advantages of breastfeeding

Nutrition is crucial for health. Poorly nourished infants grow less well, are less active, and often fall sick. Breastfeeding is the best food for infants aged between 2 and 6 months.

Advantages of breastfeeding

- Breastfeeding helps the baby bond with you and stimulates baby's development.
- Breast milk is the best and cleanest food for newborns.
- Breast milk includes all the nutrients your baby needs to grow and develop, in an easily digestible and absorbable form.
- It helps prevent jaundice and has a laxative effect.
- It protects babies from infection and allergies.
- It protects your baby from chronic diseases such as diabetes and obesity.
- It may help your baby develop intellectually.
- It is important for your health. It reduces bleeding after delivery and the risk of ovarian and uterine cancer, and delays pregnancy.

Dangers of artificial milk

- Interferes with bonding and negatively affects baby's development.
- Increases respiratory infections and places baby at a greater risk of fatality.
- Higher risk of persistent diarrhoea, malnutrition and vitamin A deficiency.
- Increases risk of allergies and milk intolerance.
- Increases risk of chronic diseases such as obesity, diabetes and cancer.
- Risks lower scores in intelligence tests.
- It may harm your health: you will be at risk of anaemia because of bleeding, and of ovarian and breast cancer, and you may become pregnant sooner.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 2. Counselling on nutrition (breastfeeding)



Breastfeed your baby on demand, day and night

EXCLUSIVE BREASTFEEDING



Exclusive breastfeeding allows baby to grow and develop healthier and will increase milk production



Breast milk contains all the water baby needs
Drink water yourself and breastfeed the baby frequently

Component 2. Counselling on nutrition (breastfeeding)

Exclusive breastfeeding

- Exclusive breastfeeding means you feed your child only breast milk and no additional food or fluids (even water) – with the exception of oral rehydration salts and medicines if needed – until the child is six months.
- Breastfeed your infant on demand, day and night, at least eight times a day. The baby's stomach is tiny, therefore, frequent breastfeeding allows your baby to take the amount needed for healthy growth and development.
- Leave your baby at the breast until they leave themselves, so they can take both fore- and hind-milk: otherwise they will not take all the nutrients they need and will feel hungry.
- Breast milk at the beginning of the breastfeed (fore-milk) is transparent, and includes a large amount of water and some nutrients. Breast milk at the end of the breastfeed (hind-milk) is thick and white and includes fats, which give energy and make the baby feel full (does not feel hungry).
- Don't give the young infant artificial milk or any other thing, including water (exclusive breastfeeding.)
- Even in hot weather do not give water to your baby. Drink water yourself and increase breastfeeds to your baby. Your milk has all the water s/he needs.
- Never use a bottle. It can carry germs and may create nipple confusion.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 2. Counselling on nutrition (breastfeeding)



**Exclusive breastfeeding: feed your baby only breast milk.
Don't give any other foods or fluids including water.**

Component 2. Counselling on nutrition (breastfeeding)

Advantages of exclusive breastfeeding

Giving other foods or fluids reduces the amount of breast milk the child takes. Less suckling leads to less breast milk production. When the breasts are not emptied mother produces less milk.

When you breastfeed your baby exclusively:

- It reduces the risk of infection. Breast milk is the cleanest food for your baby and protects the baby from infection. If you also give your infant artificial milk or other fluids the feeding bottles and utensils used for artificial milk can pass germs to the young infant, even if they appear clean.
- Ensures the infant is taking all nutrients s/he needs. If you give artificial milk there is the possibility of incorrect preparation, or that you cannot afford enough so the milk you do provide is too diluted and the baby will not take all the nutrients s/he needs.
- Ensures the baby gets the iron it needs. Iron is important for brain development. Breast milk iron is not only enough for babies until they complete six months but it is easily absorbed. Iron in artificial and cow and goat milk is poorly absorbed.
- Young infants may have difficulty digesting animal milk, and it can cause allergies and lead to diarrhoea and malnutrition.
- Never use a bottle. It can carry germs and may create nipple confusion.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 2. Counselling on nutrition (breastfeeding)

Correct positioning and attachment is a major factor in successful breastfeeding



Good attachment



Poor attachment



Good positioning



Poor positioning

Component 2. Counselling on early initiation of breastfeeding

Positioning and attachment

Poor attachment leads to ineffective suckling, which means breasts are not emptied and there will be little production of milk.

Poor attachment may also lead to breast engorgement and nipple pain. The following are the signs of good attachment of the baby to your breast.

The following are the signs of good attachment of the baby to your breast:

- more areola is seen above than below the baby's mouth
- baby's mouth is open wide
- baby's lower lip is turned outwards
- baby's chin is touching the breast.

When the baby is well attached, s/he will suckle effectively:

- baby takes slow, deep sucks sometimes pausing in between
- you can see the baby swallow.

In order to be well attached the baby should be **well positioned**.

Good positioning

- head and body are in line
- baby is held close to mother's body
- baby is facing the breast
- baby's whole body is supported

Poor positioning

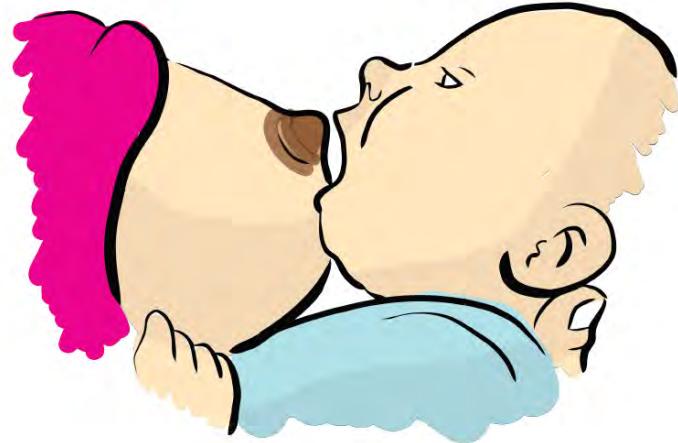
- neck is twisted
- baby is away from mother's body
- baby is not facing the breast
- only baby's upper part of the body is supported

Wash your hands and ask permission of the mother to observe the breastfeed

Caring for health and development of infants aged 2 months up to 6 months at home
Component 2. Counselling on nutrition (breastfeeding)



You may take different positions when breastfeeding



Mother touches baby's lips with the nipple, wait until baby's mouth is wide open

Component 2. Counselling on nutrition (breastfeeding)

You may take different positions to breastfeed. What is important is to be comfortable and for baby to be well attached and well positioned and suckle effectively.

Let us now improve baby's attachment:

- Sit in a relaxed and comfortable position.
- Let us correct baby's position and make sure it is a good positioning. Poor positioning is the main reason of poor attachment.
- First touch baby's lips with the nipple (sometimes you may need to express a drop of breast milk into baby's mouth) and wait until baby's mouth is wide open as wide as a yawn. Be patient.
- When baby opens wide, bring her/him quickly but gently towards your breast, aiming baby's lower lip below your nipple. Do not push your breast towards your baby.
- You should be able to feel baby sucking effectively.

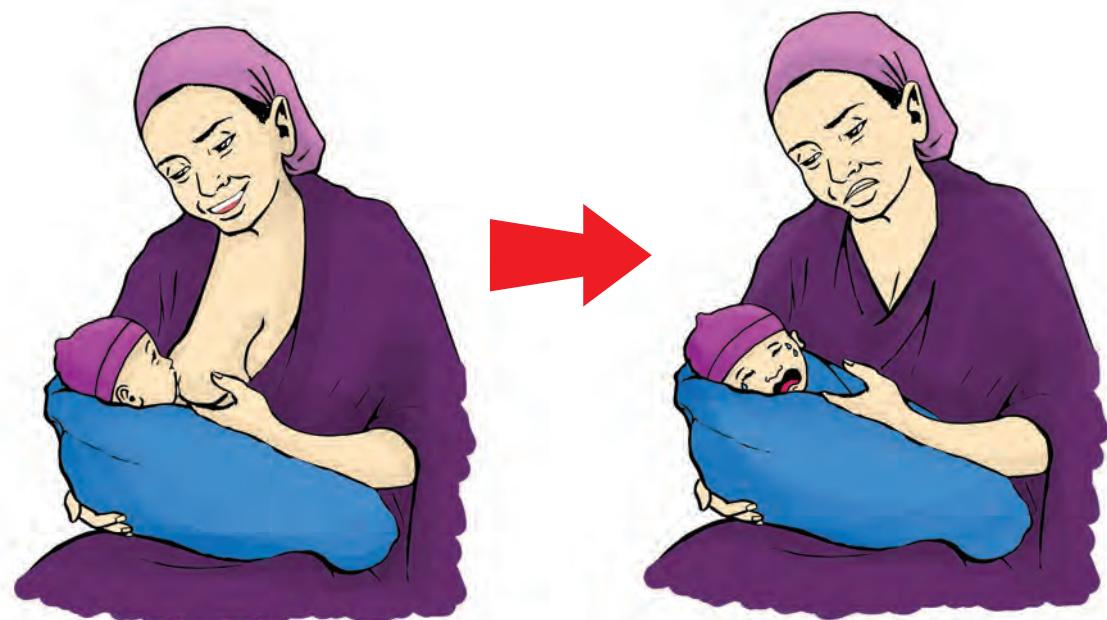
Caring for health and development of infants aged 2 months up to 6 months at home

Component 2. Counselling on nutrition (breastfeeding)

Breastfeeding problems



Frequent breastfeeding and the emptying of breasts will lead to more milk production



Make sure that the baby is well attached and well positioned.

Component 2. Counselling on nutrition (breastfeeding)

Breastfeeding problems

Not enough milk

- Suckling produces more milk.
- Bad attachment will lead to ineffective suckling.

May I observe the breastfeed to make sure the attachment is good?

- Good attachment leads to effective suckling, and emptying the breasts will lead to more milk production. As the breasts are emptied, more milk is produced.
- There is no need for other foods or fluids. Breast milk contains all the nutrients babies need. When baby is given other foods or fluids, the tiny stomach will only accommodate a small amount of breast milk. Breasts will not be emptied leading to production of smaller amounts of breast milk. Frequently breastfeed your baby exclusively.
- Breastfeed on demand. Frequent suckling and the emptying of breasts leads to the production of more breast milk.

Weak milk

The milk at the beginning of the breastfeed (fore-milk) is transparent, you may think it is weak.

There is no weak milk, breast milk of all mothers contain all nutrients baby needs, according to baby's age.

- Fore-milk: transparent milk at the beginning of breastfeed. It contains all water baby needs and important nutrients.
- Hind-milk: thick white milk at the end of breastfeed. It contains fat and other nutrients.

Baby cries after breastfeeding and is still hungry

- You may be putting your baby on one breast and then moving her/him too quickly to the other breast. Baby will not take hind-milk, and will not reach satiety. The fat content of hind-milk makes the baby feel full.
- You should not move the baby from the breast until s/he leaves it, so the baby can take both fore- and hind-milk.
- If the baby is not well positioned and well attached, s/he may not get enough breast milk and will remain hungry.

Breastfeed your baby on demand, so the baby will get the needed nutrients and more milk will be produced.

Counsel only according to the problem identified.

Ask permission to observe the breastfeed to make sure that attachment is good.

If mother complains of weak milk, ask her to breastfeed, express milk at the beginning of the breastfeed, and express again a little later. Show the mother the difference in colour and explain the difference between fore- and hind-milk.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 2. Counselling on nutrition (breastfeeding)



Exclusive breastfeeding allows baby to grow and develop healthier and will increase milk production



Breast milk contains all water baby needs
Drink water yourself and breastfeed the baby frequently

Component 2. Counselling on nutrition (breastfeeding)

Common breastfeeding problems

Not exclusively breastfeeding

Breast milk contains all nutrients baby needs. Exclusive breastfeeding allows baby to obtain all nutrients necessary for healthy growth and development.

Baby's stomach is tiny, but suitable to the amount of milk needed for her/him. Filling stomach with foods/fluids or water, will reduce amount of breast milk s/he takes and baby will not take all needed nutrients.

Giving baby water in hot weather

Besides nutrients, breast milk contains all the water that baby needs in its fore-milk, even for hot weather. You can drink water and breastfeed the baby frequently to obtain all water s/he needs.

Not feeding on demand/ infrequent breastfeeding/ baby does not seem hungry

Breastfeed your baby on demand, so your baby will get all her/his nutrients needs and more milk will be produced. Let us see signs of hunger of the baby before crying. Breastfeed your baby while s/he is hungry.

Pain in breastfeeding

- Poor attachment leads to pain when breastfeeding. It may also lead to engorged breast or cracked nipple.
- Try to correct the positioning and attachment. Let us now try to correct the positioning and attachment.
- Breastfeed frequently and on demand to relieve engorgement of the breast. You may also express breast milk. If this does not work, go to a health facility.
- If you have cracked nipple, go to a health facility.

Baby is given formula/mother is not breastfeeding

Your baby will not grow faster and healthier on artificial milk. Breast milk is more advantageous even if artificial milk is easier and faster.

Counsel only according to the problem identified.

Ask permission to observe the breastfeed to make sure that attachment is good.

Advise mothers on the advantages of breastfeeding and disadvantages of artificial milk.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 2. Counselling on nutrition (breastfeeding)



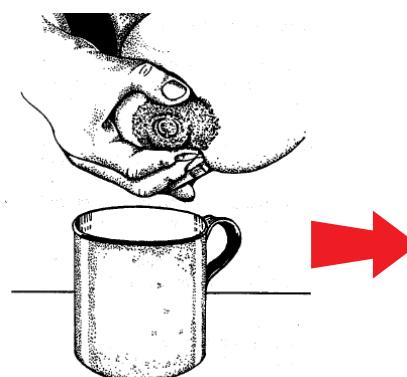
Place finger and thumb each side of the areola and press inwards towards the chest wall



Press behind the nipple and areola between your finger and thumb



Press from the sides to empty all segments



Express breast milk in a clean glass or a glass jar. Cover the glass/the jar



Store at room temperature for 4–6 hours or in a refrigerator for 24 hours



Warm breast milk in a warm water bath

Component 2. Counselling on nutrition (breastfeeding)

Counselling on breastfeeding problems

Breastfeeding and working mothers

You can continue breastfeeding your baby when you return to your work by expressing enough amounts of breast milk.

- Express breast milk into a glass or a glass jar.
- Wash the glass or jar with hot water and soap first and rinse it very well.
- Wash your hands with water and soap.
- To facilitate the process, put warm compresses on your breasts for 3–5 minutes.
- You need to express as much milk as possible to leave for your infant before you go to work. Express milk from both breasts. It may take 20–30 minutes to obtain enough milk.
- Glasses/jars should be covered and stored according to the time of expression: the milk expressed first should be given to the infant first.
- Glasses/jars can be kept at room temperature for 4–6 hours, and in a refrigerator for 24 hours.
- To give the stored milk to your infant put the glass/jar in a warm water bath. Do not shake the glass/jar or stir with a spoon, just move it gently. Do not let the warm water dilute the milk.
- Feed expressed breast milk to the infant with a cup or with a cup and spoon. Never use a feeding bottle.
- Throw any remaining stored breast milk away.

Advise only if the mother is working and wants to stop breastfeeding or to start giving additional artificial milk.

Note. If in hot weather, preferably store breast milk in a refrigerator

Caring for health and development of infants aged 2 months up to 6 months at home

Component 2. Counselling on nutrition (breastfeeding)



You can breastfeed your child while pregnant



Exclusive breastfeeding allows baby to grow and develop healthier and will increase milk production

Component 2. Counselling on nutrition (breastfeeding)

Counselling on breastfeeding problems (4)

Breastfeeding during pregnancy

- You can breastfeed your child while pregnant. Breastfeeding is not the cause of the fatigue you feel during pregnancy.
- The breastfed baby will receive the best possible food while your unborn baby will still get all the nutrients it needs from your body provided that you are eating a healthy diet and drinking plenty of fluids, to avoid going short yourself.
- You may feel mild uterine contractions during breastfeeding, these are not of concern and generally do not cause preterm labour and they are harmless to the fetus. Breastfeeding releases a hormone into your bloodstream that causes these contractions. They are harmless to the fetus.
- The content of your breast milk will change and this could change the way milk tastes, and may make breast milk distasteful to the child. In addition, milk production is likely to decrease as pregnancy progresses. These factors could lead your child to stop breastfeeding on her/his own before the new baby is born.

Advise only if mother is breastfeeding while pregnant and wants to stop breastfeeding and to start giving additional artificial milk. Advise also if mother started or wants to start complementary food.

It is advisable to stop breastfeeding during pregnancy if:

- your pregnancy is deemed high risk or you are at risk of miscarriage
- you are carrying twins or multiples
- you have been experiencing uterine pain or bleeding.

Early introduction of complementary food

Breast milk is the best food for babies until they complete six months of age. Offering food before this age, will replace breast milk means the baby will take less breast milk and you will produce less and it will be difficult to meet the child's nutritional needs.

The child will receive less of the protective components in breast milk, increasing the risk of illness. The risk of diarrhoea also increases because alternative foods may not be as clean as breast milk.

The foods given to replace breast milk are often thin, watery porridges or soups. They are easy for babies to eat. They fill the stomach but provide fewer nutrients than breast milk, meaning the child's nutritional needs may not be met.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 3. Counselling on care for hygiene



Get everything ready in advance



Do not use adult tub for young infants



Pour a little of warm water in the tub



Test water temperature by dipping in an elbow



Lay young infant in the tub feet first



Begin washing the baby



Wash genitals last
For girls: start at the front and gently wipe backwards.
For boys: gently rinse the genital area with water



Test water temperature by dipping in an elbow



Dry the infant, put on nappy and dress infant quickly

Component 3. Counselling on care for hygiene

Bathing

Bathe the baby before feeding to avoid spitting in the tub. Make bathing special time and fun for your baby. Sing and talk to your infant to increase bonding and trust, and it can add to her/his mental and emotional growth.

1. Get everything ready in advance: the tub, a cup for pouring water, baby soap, two washcloths, cotton balls for cleaning baby's eyes and ears, towels, clean clothes and a clean nappy and a few bath toys for the baby to play with. Never leave your infant alone in any depth of water. S/he can fall over and drown in a small amount of water. You should stay with your infant throughout bath time.
2. Pour a small amount of warm water in the tub, infants should never be submerged with water to avoid chances of drowning. Test water temperature by dipping in your elbow to avoid any risk of scalding. You can use a bigger tub as your infant grows older but do not bathe the baby in an adult tub where s/he may slip and drown.
3. Place your infant in the tub feet first. Keep one hand supporting the back, neck and head as you carefully lower your infant into the tub. Continue supporting the baby throughout the bath with the non-dominating hand, and use the other hand to wash her/him. To keep baby warm, pour warm water over her/his body throughout the bath.
4. Use a soft washcloth to gently wash the face, body, arms and legs and cotton balls to wipe infant's eyes and ears. Start with the face then move to the dirtiest parts. Clean genitals last. For girls, wet a cotton ball, hold the legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water while bathing.
5. Wash the hair: lean the infant on the back and gently pour water onto hair and scalp. There is no need to use shampoo. It may strip the natural oils, which keep the scalp healthy, from the hair. If you do use baby shampoo, use your hand to protect the eyes from being irritated. Before rinsing, check again that the temperature of the poured water is not too hot.
6. Take out of the tub and dry quickly with a towel.
7. Put on a clean diaper and clean clothes.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 3. Counselling on care for hygiene

Change diaper regularly



Wipe bottom with a damp cloth
For girls, clean genitals from
front to back
For boys, gently rinse with
water



Give baby some diaper-free
time to air the skin to prevent
rash



Put on a new diaper



Fasten the diaper



Dress your infant



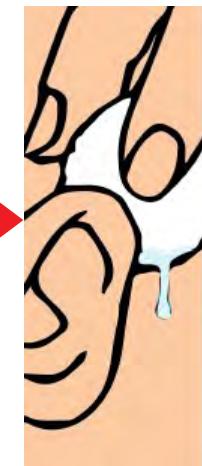
Wash your hands



Trim your infant's nails



Clean your baby's nose



Be careful not to stick anything inside baby's ear.
It can cause damage.

Component 3. Counselling on care for hygiene

- **Keep face, neck and hands always clean several times a day**

At this age, infants put their hands in their mouths and can spread germs.

- **Change diapers regularly and keep diaper area always clean**

For girls, wet a cotton ball, hold the legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water.

- **Trimming fingernails**

Always keep fingernails clean. Dirty nails carry germs which can enter baby's body and cause disease when the baby sucks her/his hands. Always keep your infant's fingernails trimmed. With long and sharp nails, the infant can scratch and hurt her/himself. The best time to trim nails is when your infant is asleep. Use appropriate scissors to cut nails without hurting the baby, by avoiding cutting nails too deep.

- **Cleaning ears**

Be very gentle. Use a cotton wool ball to wipe behind and around the ears. Never insert cotton earbuds into the ears. It may damage the eardrum.

- **Keep infant's nose unclogged**

Clean dried mucus in the nose gently with a damp soft cotton cloth twisted to form a point.

Caring for health and development of infants aged 2 months up to 6 months at home

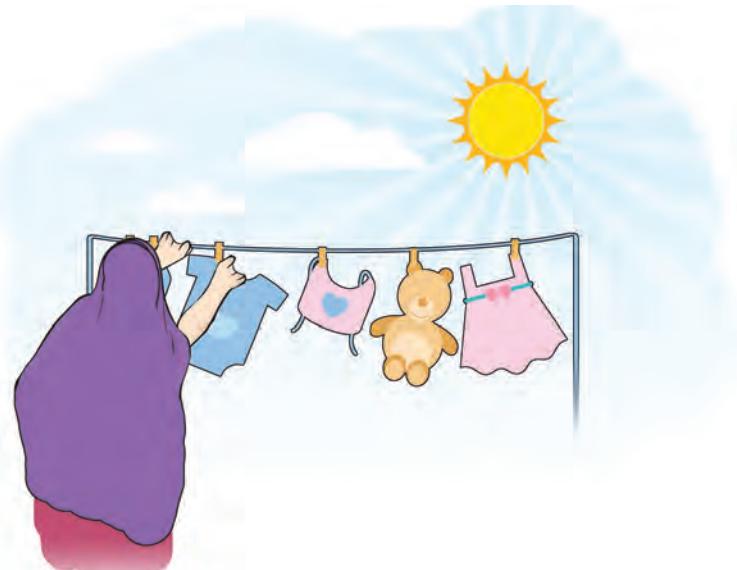
Component 3. Counselling on care for hygiene



Wash your hands



With cotton wool ball and warm water, wipe gently from inside corner to the outside



Wash your baby's clothes and toys and hang them in the sun, it helps to kill germs

Component 3. Counselling on care for hygiene

- **Clean eyes**

Clean eyes to prevent eye infection. Gently remove dried mucus with a soft damp cloth or soft cotton ball. Moisten a cotton wool ball with warm water and gently clean the eyelids, wiping from inner side to outer side of the eye. Use a different piece of cotton wool for each eye.

- **Keep toys clean**

Regularly wash toys with plain water, and wipe them using a clean tissue paper or cloth to avoid infection. At this age, infants will reach for things and put them into their mouth.

- **Keep clothes clean**

Remove dust and any substances that may irritate the infant's delicate skin.

- **Sanitize the home**

Clean your house to limit exposure to harmful germs and microbes. Keep your home free of flies and mosquitoes to avoid diarrhoea and malaria. The baby should sleep under a mosquito net. Do not sweep and dust close to your baby. Dust has allergic properties and carries microorganisms. Ask family members not to smoke inside the house.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 4. Counselling on developmental milestones

2-month-old infant



Can hold head up and push when lying on tummy



Begins to follow things with eyes

Component 5. Counselling on developmental milestones

Developmental milestones mean how your infant plays, learns, speak and moves. They offer important clues about your infant's development. You need to learn how to check the milestones at different stages.

In this age category, the infant has not yet reached four months

At two months

- When lying on tummy, can hold head up and begin to push up
- Makes smoother movements with arms and legs
- Coos, makes gurgling sounds

Vision

- Begins to follow things with eyes and recognize people at a distance
- Begins to smile at people

Hearing

- Turns head towards sounds
- Startle response at loud sounds

Caring for health and development of infants aged 2 months up to 6 months at home

Component 4. Counselling on developmental milestones

4-month-old infant



Holds head steady unsupported



Smiles at familiar faces



Reaches for toys with one hand



Grabs toes and puts them in mouth when lying on back



Puts hands in mouth

Component 5. Counselling on developmental milestones

Developmental milestones mean how your infant plays, learns, speak and moves. They offer important clues about your infant's development. You need to learn how to check the milestones at different stages.

In this age category, the infant has not yet reached four months

At four months

- Holds head steady, unsupported
- Pushes down on legs when feet are on a hard surface
- Reaches for toy with one hand
- Brings hands to mouth
- Babbles with expression and copies sounds s/he hears
- Grabs toes with hands and puts them in mouth when lying on back

Vision

- Follows moving things with eyes from side to side
- Sees toys and reaches for them
- Recognizes familiar people
- Smiles at familiar faces

Hearing

- Turns head towards sounds
- Startle response at loud sounds

Caring for health and development of infants aged 2 months up to 6 months at home
Component 4. Counselling on developmental milestones



Positions to hold a baby with colic

Component 5. Counselling on developmental milestones

Relieving a colicky baby

If the baby is crying because of colic:

- Make sure the baby is positioned properly during feeding. This will reduce the amount of air the baby takes in.
- Limit external stimulation. Keep the baby in a quiet calm place, lower the lights, reduce noise around the house, and speak or sing softly to your baby.
- Medicines for colic are not recommended. They can be harmful.
- The best way to comfort a crying baby is to hold her/him close, move gently, and apply gentle pressure on the abdomen.
- Walk the baby kangaroo-style. With your baby facing either in or out, walk baby around the house or, if weather permits, outside.
- Hold her/him in the “colic carry”. Position your baby so that her/his stomach rests on your forearm and the head is supported in the palm of your hand or the crook of your arm.
- Lay her/him across your lap and gently rub her/his back to help release gas.
- Try swaddling her/him. Some babies respond well to being wrapped tightly, especially when being rocked.
- Rock your baby in your arms. The steady rhythm of the movement is soothing.
- Pedal baby’s legs. With your baby on her/his back, gently move her/his legs in a pedaling motion to help release gas.
- Put a warm water bottle on your baby’s tummy.
- Try changing your own diet by eliminating dairy products, caffeine, onions, cabbage, broccoli, garlic and spicy foods.
- Colic may be frequent in the first few months, but as the infant gets older and s/he swallows less air the colic will improve.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 4. Counselling on developmental milestones

Burping a baby



Over your shoulder



Sitting on your lap



Face down across your lap

Component 5. Counselling on developmental milestones

Burping a baby

When the baby feeds, bubbles of air can get trapped in her/ his stomach. These bubbles can make the baby uncomfortable and grizzly. You can help baby free up room in her/his tummy, s/he can settle and feed for longer, by burping. There is no rule that you must burp your baby after every feed.

Burp your baby if she/he:

- often brings up a little milk after feeds (posseting)
- is colicky
- has reflux.

There are three ways to burp a baby:

1. Over your shoulder

- Hold your baby so that her/his chin is resting on your shoulder.
- Support the baby's bottom with your hand.
- Gently rub and pat the baby's back with your other hand.

2. Sitting on your lap

- Sit the baby on your lap facing away from you.
- Use one arm to support the baby's body, the palm of your hand supporting the chest while your fingers gently support the chin and jaw. You should keep your fingers away from baby's throat.
- Lean baby slightly forwards and gently pat or rub baby's back for a while with your free hand.

3. Face down across your lap

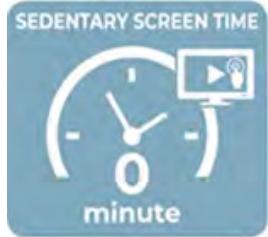
- Lie your baby face down on your legs, at a right angle to your body so the baby is lying across your knees.
- Support baby's chin and jaw with one hand.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 4. Counselling on developmental milestones.



Physical activity is essential for infant's healthy growth and development



LET'S
Be active | World Health Organization

Baby requires 14-17 hours of good quality sleep (up to 3 months)
12-16 hours for the age 3-6 months



Don't restrain baby movement for more than one hour a time

Component 5. Counselling on developmental

Effect of physical activity and good quality sleep on growth and development

Physical activity

- Make physical activity routine in your baby's life.
- The baby should be physically active several times a day, and in a variety of ways.
- Place your infant for at least 30 minutes – spread throughout the day – in a prone position (tummy time) while awake.

Reduce to maximum sedentary restraining time

- Do not restrain baby, in prams/strollers, strapped on your back or overwrapped, for more than one hour at a time.
- Restraining babies reduces communication with other family members leading to language delays and reduced attention span.
- Minimize sedentary hours by talking, singing and touching your baby.

Good quality sleep

- Good quality sleep plays an essential role in growth and development. Up to the age of three months your baby requires 14–17 hours a day of good quality sleep; between 3–6 months s/he requires 12–16 hours.
- Good quality sleep provides the energy babies need to be active. A well-rested baby is an active baby.
- Offer a regular, calm environment to sleep. This helps baby transition to sleep.
- Keep electronic screens out of babies' bedrooms.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 5. Counselling on care for development (play and communicate with the infant)

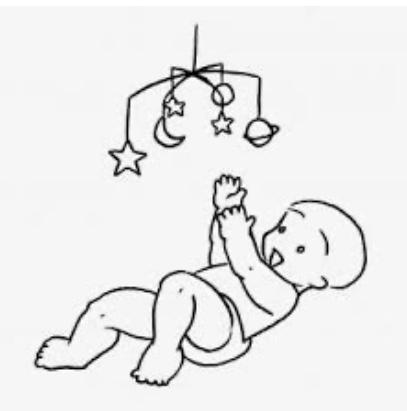
Infant 2–4 months of age



Smile and laugh with your infant



Move colourful objects in front of the infant's face,
let infant try to reach and grab



Give infant rattle or ring with strings

Component 5. Care for development (play and communicate with the child)

Early experiences during the first years of life help determine the kind of adults children will become. You have to give your baby special care for development by giving them love, attention, and many opportunities to learn. By playing and communicating with your children you help them grow healthier and stronger, learn how to communicate their needs, solve problems, and help others. Children learn the skills that will prepare them for life from a very early age.

While breastfeeding, bathing and dressing the baby, and during other daily tasks you can talk, sing and touch her baby, these are good opportunities to play and communicate with your child.

Let me show you how to play and communicate with your baby:

Age	Play activity	Communication activity
At the age of 2–4 months	Move colourful objects slowly in front of the infant's face and help the infant grab and hold objects Give infant a rattle or ring with strings	Smile and laugh with your baby Get a conversation going by copying your baby's sounds and gestures

Caring for health and development of infants aged 2 months up to 6 months at home
Component 5. Counselling on care for development (play and communicate with the infant)

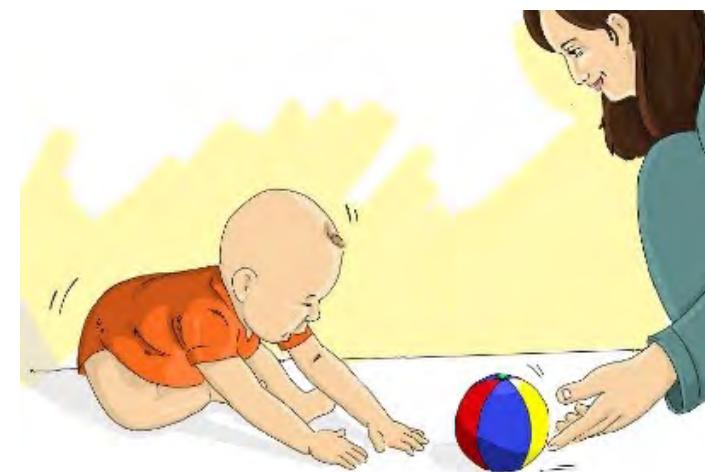


Infants 5 months of age

Talk softly to your baby



Provide objects to reach for, grab and examine



Play with ball

Component 5. Care for development (play and communicate with the child)

Early experiences during the first years of life help determine the kind of adults children will become. You have to give your baby special care for development by giving them love, attention, and many opportunities to learn. By playing and communicating with your children you help them grow healthier and stronger, learn how to communicate their needs, solve problems, and help others. Children learn the skills that will prepare them for life from a very early age.

While breastfeeding, bathing and dressing the baby, and during other daily tasks you can talk, sing and touch her baby. these are good opportunities to play and communicate with your child.

Let me show you how to play and communicate with your baby:

Age	Play activity	Communication activity
At the age of 5 months	Give your baby a wooden spoon or other household object to reach for, grab and examine Play with a ball, rolling the ball back and forth	Talk softly with your baby Get a conversation going by copying your baby's sounds and gestures

Caring for health and development of infants aged 2 months up to 6 months at home

Component 6. Counselling on prevention of accidents and injuries

1. Choking and suffocation



Poor positioning
may lead to choking



Good attachment
prevents choking



Don't sleep in same bed with
young infant as this may cause
suffocation



Let your infant sleep in a separate bed



Your infant reaches for objects, can put small
things in the mouth and s/he may choke



If young infant is choking

Sit down and lay baby face
down along your thighs,
supporting baby's head with
your hand
Give up to five sharp back
blows with the heel of one
hand in the middle of the back
between the shoulder blades

Component 6. Counselling on prevention of accidents and injuries

Choking and suffocation

Choking is a common cause of injury and death in young children. Their small airways are easily obstructed.

If a baby is choking, teach parents:

- Sit down and lay the baby face down along your thighs, supporting the head with your hand.
- Give up to five sharp blows with the heel of your hand in the middle of the back between the baby's shoulder blades.

Causes of choking and suffocation:

- Poor attachment to the breast can cause choking. You can avoid choking by ensuring good positioning and attachment during breastfeeding.
- Allow me to observe the breastfeed.

Correct positioning and attachment if they are poor.

- Babies that sleep in the same bed as their parents are at a risk of suffocation. Parents can roll onto babies during sleep, and babies can get tangled in the sheets or blankets. Your baby needs a separate bed, with no siblings or parents.
- Infants can reach for objects and grab them, and can put them into their mouths and choke. Keep small objects away from your infant.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 6. Counselling on prevention of accidents and injuries

Choking and suffocation



Don't smoke at home. This may cause suffocation



Smoke inside the home, may cause suffocation

Remove bibs before sleeping



Component 6. Counselling on prevention of accidents and injuries

Choking and suffocation 2

Smoke inside the house irritates baby's lungs, and may lead to suffocation. If you must use charcoal or wood for cooking do it outside the house.

Tobacco smoke

- Causes lung irritation and may lead to suffocation. Tobacco smoking harms those who smoke and those who inhale the cigarette smoke passively.
- The smell of tobacco smoke remains on clothes and bodies and irritates the lungs. It is better for the health of the whole family not to smoke tobacco.
- Keep your baby away from smokers and places where people smoke.
- Don't smoke inside your home or car, or anywhere near your baby, even when you are outside.
- If you have been exposed to smoke, take a shower and change clothes before touching your baby.

Pillows, stuffed toys and blankets

- Babies cannot raise their heads. If your baby sleeps face down on a soft surface s/he can suffocate.
- Keep your baby's bed clear of stuffed toys and soft pillows, to avoid suffocation.
- Always place your baby on her/his side to sleep.

The ribbons used to tie bibs around the baby's neck, or attached to pacifiers, can turn around the neck and cause suffocation. Remove bibs and pacifiers (which are not recommended for babies) before sleeping.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 6. Counselling on prevention of accidents and injuries

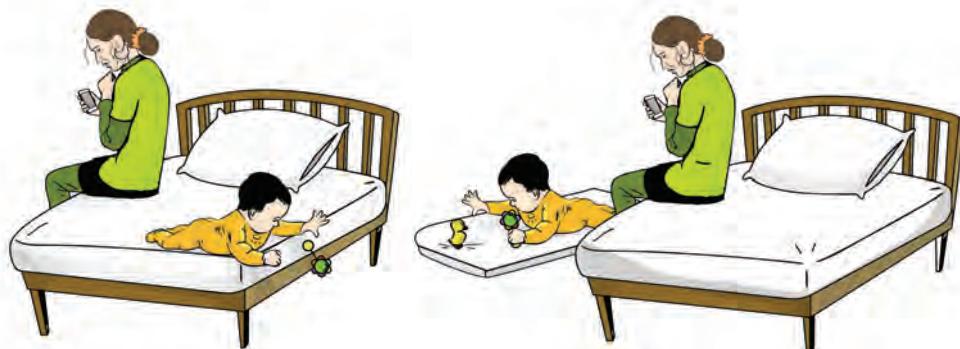
1. Wounds and falls



Don't leave things left on the ground, or leave slippery ground.
This may cause falling of the person who carries him/her



Trim baby's finger mails regularly



Don't place on a high surface while you are distracted while you are distracted. Place your infant on a low surface.



Don't put pins attached to infant's clothes.
necessity, use safety pins

Component 6. Counselling on prevention of accidents and injuries

Falls

- Never leave toys or other objects on the ground, or leave the ground slippery. Family members can fall while carrying the baby. Baby also may be fractured. Always keep the house tidy, with everything in its place.
- Never leave babies unattended on high surfaces. They may fall, and fractured.

Wounds

- Never leave pins attached to your baby's clothes, they may injure her/him. If necessary, use safety pins.
- Trim baby's fingernails regularly. If they are long and sharp they can cause cuts and scratches.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 6. Counselling on prevention of accidents and injuries

Burns and drowning



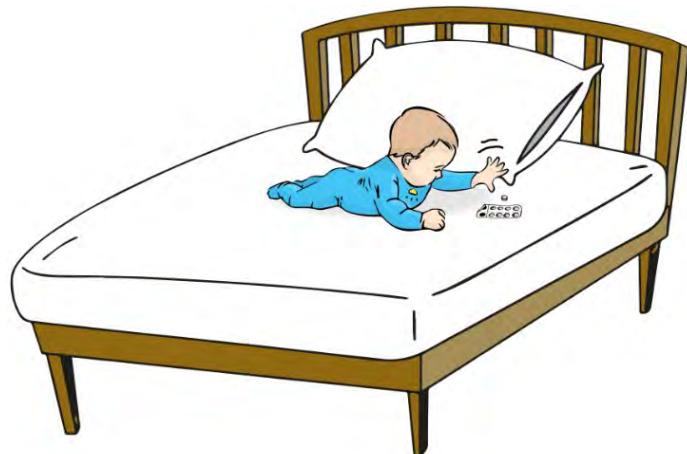
Test bath water with your elbow to avoid scalding bath by dipping elbow



Do not drink hot drinks while you carry your infant



Never leave your baby alone in the bath tub



Never leave harmful substances in the reach of your infant

Component 6. Counselling on prevention of accidents and injuries

Burns

- Using hot water to bathe the baby may scald her/him. Test water with your elbow before bathing the baby.
- Never carry your baby while cooking or washing next to containers with boiling water, or while carrying a hot drink. You should keep the baby in a safe place, where s/he can be seen, when you are doing the chores or drinking hot liquid.
- Avoid direct sunlight when it is hot. Baby can get sunburn.

Drowning

- Never leave your baby in the tub unattended: infants may drown in a few inches of water.

Intoxication

- Infants can reach for and grab objects. Never leave harmful substances such as medicines and pesticides lying around.

Caring for health and development of infants aged 2 months up to 6 months at home
Component 6. Counselling on prevention of maltreatment, neglect and violence



Over your shoulder



Sitting on your lap



Face down across your lap

Component 7. Counselling on prevention of maltreatment, neglect and violence

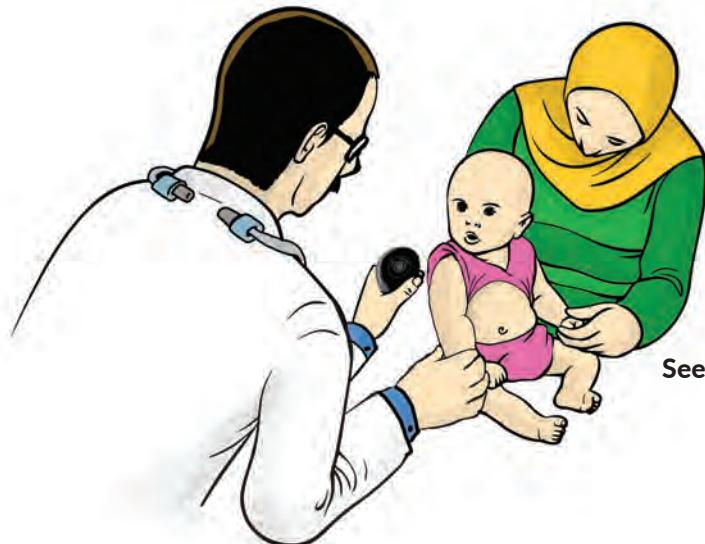
Maltreatment and neglect negatively impact on brain development during infancy and early childhood, and on the child's subsequent physical, cognitive, emotional and social growth.

Emotional development and nutrition

- Skin-to-skin contact: your baby feels secure and protected in the skin-to-skin position.
- If you breastfeed, you are providing the best food for baby and creating a strong bond between yourself and your baby.
- Pick up your baby when s/he cries. This signals to the baby that s/he is safe and you are a caring, responsive parent. This positively affects baby's emotional development.
- Do not discriminate between boys and girls or between siblings in playing and communicating, or in timely care-seeking. To do so negatively affects baby's future development.

Caring for health and development of infants aged 2 months up to 6 months at home

Component 6. Counselling on prevention of maltreatment, neglect and violence



Seek care early



Immunize the child



Play and communicate with your baby



Component 7. Counselling on prevention of maltreatment, neglect and violence

Nurturing

- Playing and communicating with your baby stimulates her/his psychosocial development and strengthens the love between both of you.

Health

- Immunizing your baby prevents illnesses.
- Timely seek care from a qualified health care provider when your baby does not feel well.
- Rational use of antibiotics: only give prescribed treatment; never administer old opened antibiotics.
- Ensure your baby is clean and has clean clothes. It is an essential part of taking care of her/his hygiene.

Shelter and safe living conditions

- A home where your baby is safe from harm, surrounded by a family giving her/him love, attention, and opportunities to learn, and where other siblings are treated well will have a lasting positive effect on the baby's social, emotional and cognitive development.

Caring for health and development of infants aged six months up to one year at home.

Component 1. Counselling on family health care practices. Care-seeking practices.

Checking for the presence of danger signs



Unable to breastfeed



Convulsions



Vomits everything

Caring for infants aged six months up to one year

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the baby to a health facility

Check for the presence of danger signs. These are signs that indicate a possible critical condition. If any of these signs are present, the baby needs to be urgently referred to a health facility.

First sign: Unable to drink or breastfeed

Your infant is too weak to be able to drink or to suckle and breastfeed.

Second sign: convulsions

Baby's arms and legs become stiff. The baby may stop breathing and become blue. There could be a recurring movement of one part of the body, such as twitching of the mouth or blinking of the eyes.

Third sign: vomits everything

If your baby is not able to hold anything down at all, all that goes down, comes backup; this is a danger sign.

If your baby vomits several times but holds down some fluids, this is not a danger sign.

Give information as listed in the recording form.

Get permission to check the baby.

Remember to wash your hands before touching the baby.

Check if any danger sign is present. If yes, counsel on urgent referral. If not present, teach the mother the danger signs.

If the mother says the baby is unable to breastfeed, or if you are in doubt, check by asking the mother to breastfeed her baby.

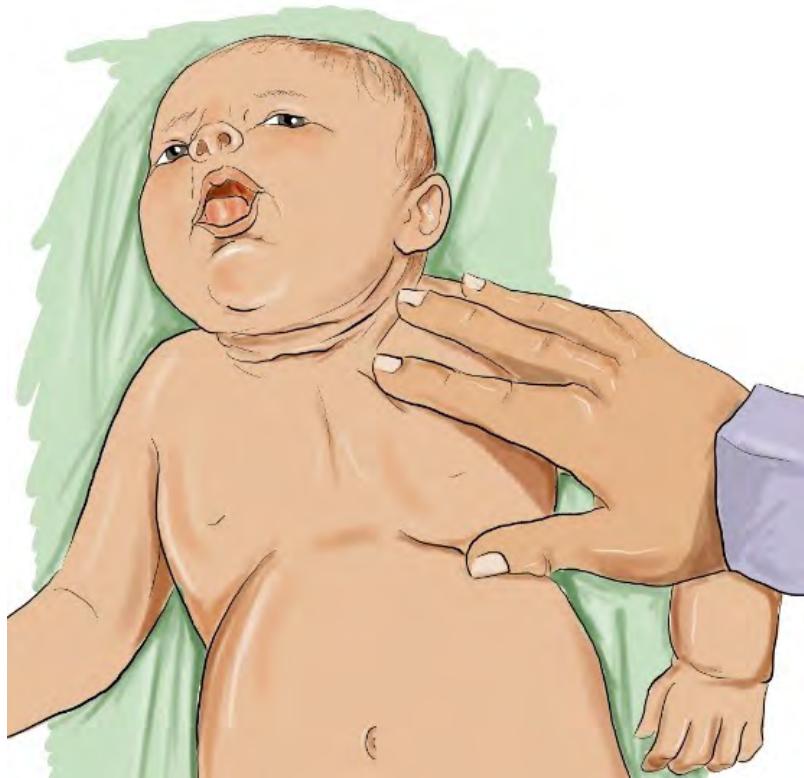
For convulsions, first ask the mother if the infant has had convulsions, and check if infant is convulsing now.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of infants aged six months up to one year at home.

Component 1. Counselling on family health care practices. Care-seeking practices.

Checking for the presence of danger signs



Difficult breathing



Use a timer to count breaths

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care: checking for the presence of danger signs

Fourth sign: fast breathing

Infants often breathe faster than older infants and children, and slower than newborns and younger infants. If you notice your baby is breathing more quickly than normal or that there is difficulty in breathing this is a danger sign that, could denote a serious health condition.

You need to take the baby urgently to a health facility.

Is the baby fast breathing?

Use a timer to count respiratory rate.

Counting respiratory rate

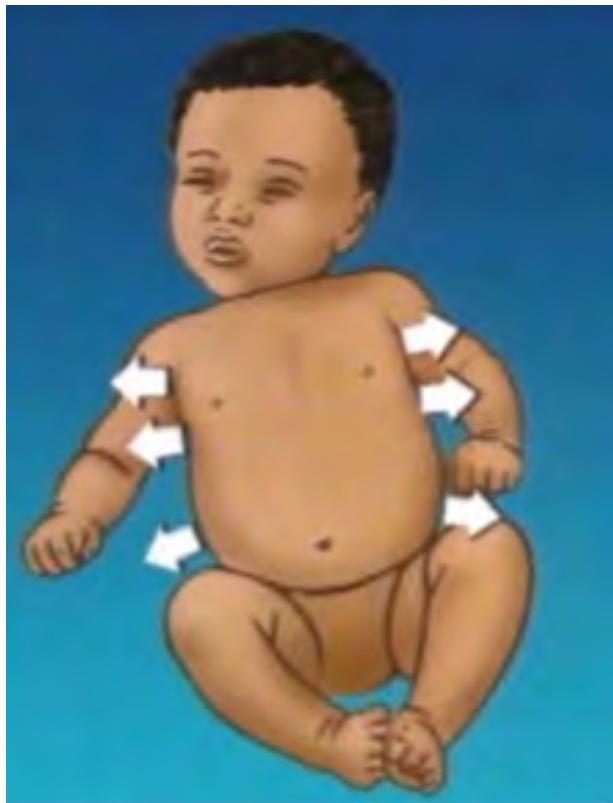
1. Wait for baby to be calm or sleeping. Do not count when baby is breastfeeding or crying, otherwise the count will be incorrect.
2. Make sure there is enough light to see the breathing movements.
3. Gently lift the baby's shirt so you can see breathing movements.
4. Watch a few breaths until you are sure when the baby is breathing in and out.
5. Start the timer and count breaths for one full minute (until the long beep that marks the end of one minute).
6. If you counted 50 breaths or more, do not repeat the count. The baby has fast breathing.

If the baby is fast breathing, urgently refer to a health facility.

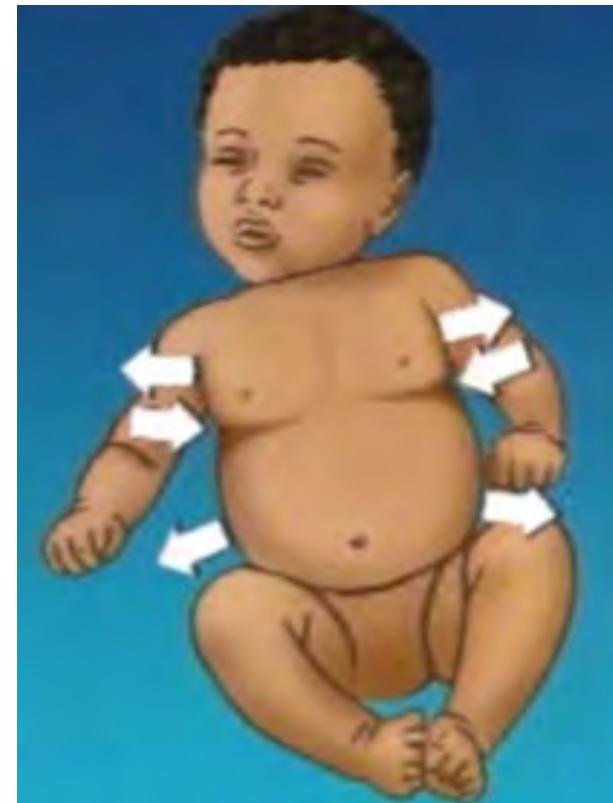
Caring for health and development of infants aged six months up to one year at home.

Component 1. Counselling on family health care practices. Care-seeking practices.

Checking for the presence of danger signs



Normal child: when child breathes in upper and lower chest walls and abdomen **go out**



Chest indrawing: when child breathes in upper chest wall and abdomen **go out** while lower chest wall **goes in**

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the baby to a health facility.

Check for the presence of danger signs.

Fifth sign: severe chest indrawing

If your baby is breathing with difficulty and you find a very deep groove between the chest and abdomen.

This is a danger sign, and the baby has a serious condition and should be taken to a health facility urgently.

Teach the danger signs

Chest indrawing is the groove formed between the chest and abdomen because of the lower chest wall going in when the child breathes in, and the upper chest and abdomen moving out.

How to recognize chest indrawing:

1. Wait for the child to be calm (these movements during crying or breastfeeding are not chest indrawing).
2. The child should not be bent at the waist.
3. Ask the caregiver to raise the child's clothes above the chest.
4. Look at the lower chest wall when the child breathes in. It must be clearly visible and present with every breath.
5. If you are unsure of the presence of chest indrawing, then, decide it is not chest indrawing.

Caring for health and development of infants aged six months up to one year at home.

Component 1. Counselling on family health care practices. Care-seeking practices.

Checking for the presence of danger signs

IF THE YOUNG INFANT HAS ANY DANGER SIGN, SKIP ALL OTHER TASKS AND ASSIST REFERRAL.



b. From whom to seek care

Component 1. Counselling on family health care practices

Care-seeking practices

From whom to seek care

- Trained health care providers should be the only trusted source of medical care.
- Do not seek care from untrained sources: they can cause harm to your baby instead of being of benefit.

Caring for health and development of infants aged six months up to one year at home.

Component 1. Counselling on family health care practices. Care-seeking practices.

Checking for the presence of danger signs



Help to arrange transportation



Ask mother if she has savings



Take your baby to a health facility in a timely way

Address any difficulties in order to take young infant to a health facility

Component 1. Counselling on family health care practices

Care-seeking practices

From whom to seek care

Use good communication skills to explain to families importance of referral, to convince them and to solve problems.

Counsel them only on the referral difficulty that you identify. Do not talk about difficulties that are irrelevant.

Difficulties	Advice
Fear that the health facility is a place where babies often die	If baby is sick and you do not seek care quickly baby may die Timely care from a health facility where there are doctors, supplies and equipment can help sick babies get better Without treatment sick babies can easily get worse and die
There is no one to care for the other children or do daily tasks	If the baby does not get to a health facility it may risk her/his life. <ul style="list-style-type: none">• Would your husband stay with the other children in such a critical situation?• If not, ask who else (relatives or neighbours) can help with the children and daily tasks?• I can talk to your husband or help contact someone to help
Lack of transport	I will assist in finding means of transport
Lack of money	Do you have any savings? If not, I will help approach community committees or other members of the family
Family wants to take baby to a faith/ traditional healer first	A baby showing danger signs needs urgent treatment in a health facility. Delaying treatment may make the baby's condition worse.
Mother is alone and she needs permission from husband or a family elder	I can help in contacting the person who can give permission to take the baby to a health facility.

Caring for health and development of infants aged six months up to one year at home

Component 1. Counselling on family health care practices. Prevention practices



DPT (diphtheria, pertussis, tetanus),
haemophilus influenzae type B (Hib),
hepatitis B



Polio

Component 1. Counselling on family health care practices

Prevention practices

Vaccination protects your infant from serious illnesses and complications such as paralysis, brain damage, blindness and death.

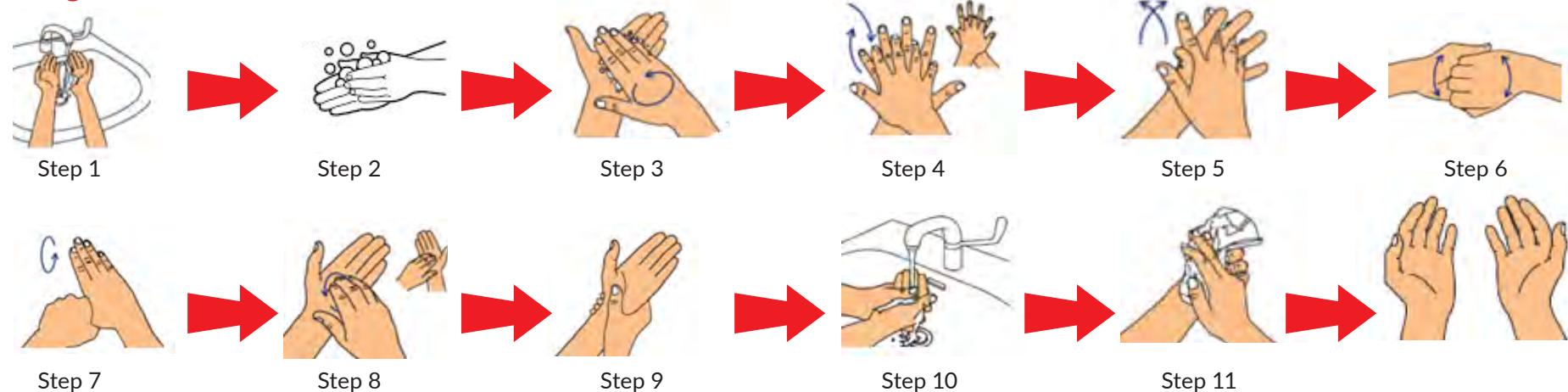
At this age babies should receive one dose of:

- Polio vaccine
- DPT (diphtheria, pertussis, tetanus)
- Hepatitis B vaccine
- Hib vaccine

Caring for health and development of infants aged six months up to one year at home

Component 1. Counselling on family health care practices. Prevention practices

1. Washing hands



REMEMBER TURN OFF THE TAP WITH A TOWEL, NOT WITH YOUR HAND.



When to wash hands



Component 1. Counselling on family health care practices

2. Prevention practices. Hand washing

Hand washing helps prevent the spread of infections. It can prevent major childhood illnesses like pneumonia and diarrhoea, the most common killers of children under five.

Handwashing with soap removes germs from hands.

When should you wash hands?

- After changing diapers or cleaning up a child who has used the toilet;
- Before touching the baby;
- After using toilet;
- Before preparing food;
- Before eating;
- Before feeding a child;
- Before and after caring for someone who is sick;
- After blowing your nose, coughing, or sneezing;
- After touching an animal, animal feed, or animal waste;
- After touching garbage.

How should you wash your hands?

1. Wet hands with water
2. Rub wet hands on soap, covering the hand with soap
3. Rub palms together
4. Rub back of each hand with the palm of the other hand keeping fingers interlaced
5. Rub palm to palm with the fingers interlaced
6. Rub back of the fingers with the fingers interlocked
7. Reach each thumb clasped in opposite hand using a rotational movement
8. Rub the tips of the fingers in the opposite palm using a circular movement
9. Rub each wrist with the opposite hand
10. Rinse the hands with water
11. Dry thoroughly with a clean towel

Remember to turn the tap off with a towel, not with your hands.

Caring for health and development of infants aged six months up to one year at home

Component 1. Counselling on family health care practices. Prevention practices



Use an insecticide-treated bednet to prevent malaria in high-risk areas



Antibiotics are only prescribed by trained health professionals



Don't take another person's antibiotics (neighbour, cousin, etc)



Don't purchase antibiotics from a pharmacy without a doctor's prescription



Don't give your child an old antibiotic present at home

Component 1. Counselling on family health care practices

Prevention practices

Use of insecticide-treated bednet for prevention of malaria in high-risk areas

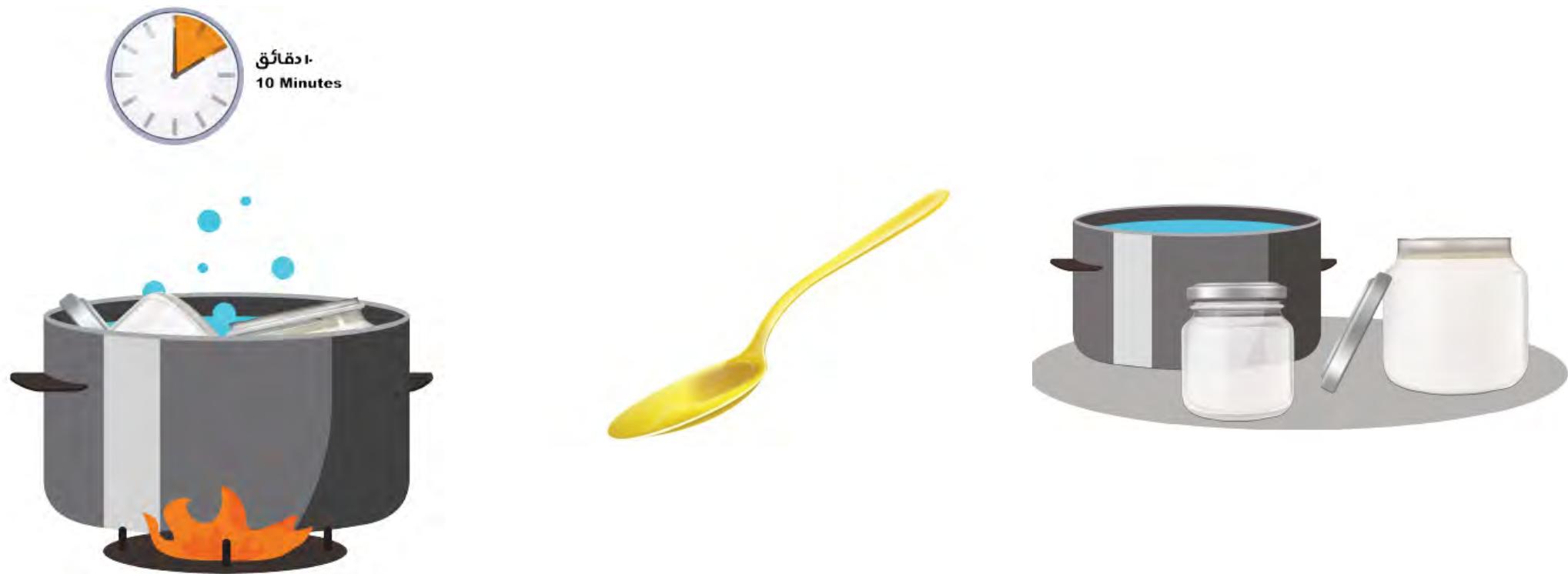
Malaria is a serious illness carried by mosquitoes. It is a major cause of death in children under five. Mosquitoes bite at night. You and your baby should sleep under an insecticide-treated bednet to prevent the serious effects of malaria.

Rational use of antibiotics

- Antibiotics kill microbes that cause disease and can save the lives of sick children.
- Different diseases require specific types of antibiotic which should only be prescribed by a trained health professional.
- If antibiotics are given to a baby who does not need them they can cause harm:
 - The microbe will get used to and resist the antibiotic. The baby will then need much stronger antibiotics which may affect the baby's health.
 - Unnecessary use of antibiotics can impair your child's development.
- Do not purchase antibiotics from the pharmacy without a doctor's prescription.
- Do not take old antibiotics found at home or given by a neighbour: the baby may not be in need of an antibiotic, s/he may not need this type of antibiotic, or the antibiotic could be old (expired).

Caring for health and development of infants aged six months up to one year at home

Component 1. Counselling on family health care practices. Prevention practices



Boil water, clean spoons and utensils

Component 1. Counselling on family health care practices

II. Prevention practices

3. Food hygiene: Boil water and clean cup and spoon, wash vegetables and cooking utensils

Breastfeed your baby and avoid artificial milk.

- Breast milk is the best food for your child. If there is a compulsory reason not to breastfeed, avoid using the feeding bottle, as they are difficult to clean. Instead, feed your baby with a cup and spoon and make sure they are cleaned thoroughly. Feeding bottles are difficult to clean and can carry germs and cause illnesses to your baby.
- Boiling the water kills microorganisms such as bacteria, viruses, or protozoans that can cause disease.
- Bring water to a full rolling boil for one minute, and let it cool before using it.
- Boiling makes the tap water safe.
- At this age, the child starts eating alongside breastfeeding, therefore cleaning cups and spoons and other cooking utensils is very important.

If there is no safe water in the area and/or if there is a compulsory reason for a mother not to breastfeed, advise on boiling water to kill organisms

Caring for health and development of infants aged six months up to one year at home
Component 2. Counselling on nutrition



Continue breastfeeding your baby and introduce
complementary food when s/he reaches six months of age

Component 2. Counselling on nutrition

Complementary food

At this age, breast milk is beneficial to your infant, it:

- provides half the infant's nutritional need
- protects your infant from illness
- helps your infant grow.

When your infant reaches six months of age:

- the nerves and muscles in the mouth are sufficiently developed to let the baby munch and chew.
- the baby's digestive system is mature enough to begin to digest a range of foods,

To complement the second half of your baby's nutrients need, offer your baby complementary food when s/he reaches the age of six months.

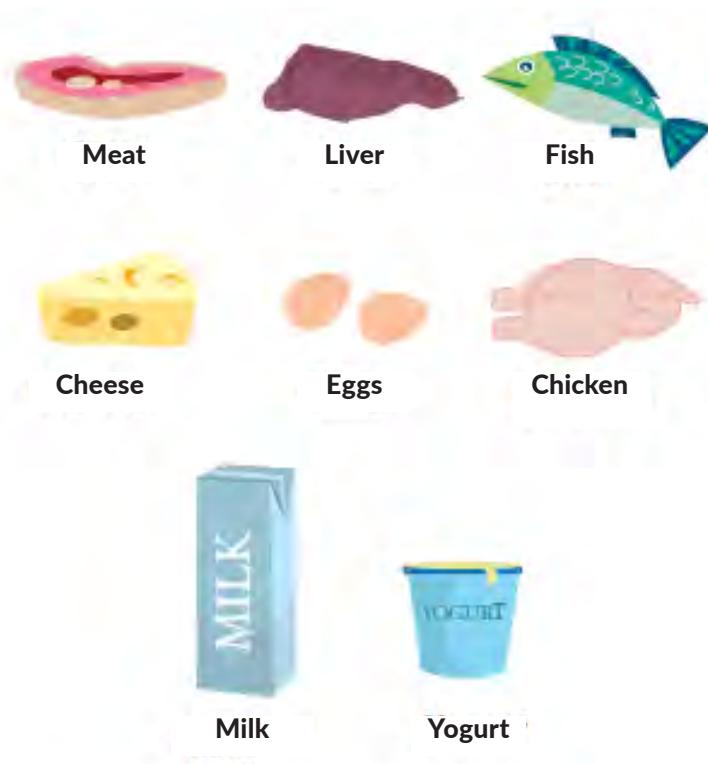
Continue breastfeeding your baby, on demand, day and night until the s/he reaches 24 months, alongside the complementary food.

If this food is not given, your infant can lose weight and become malnourished.

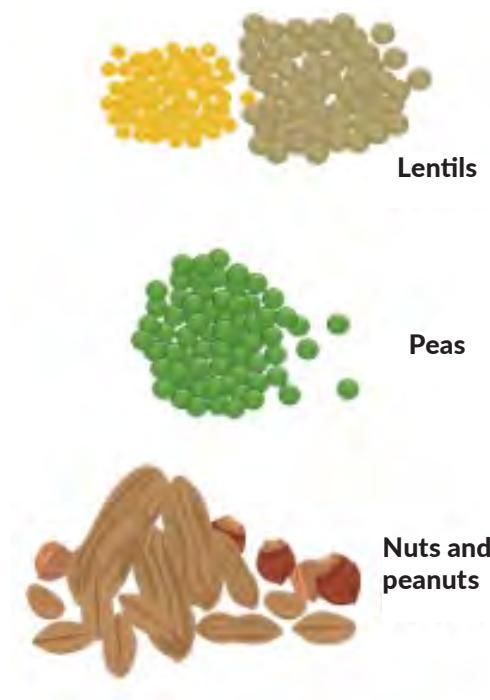
Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition

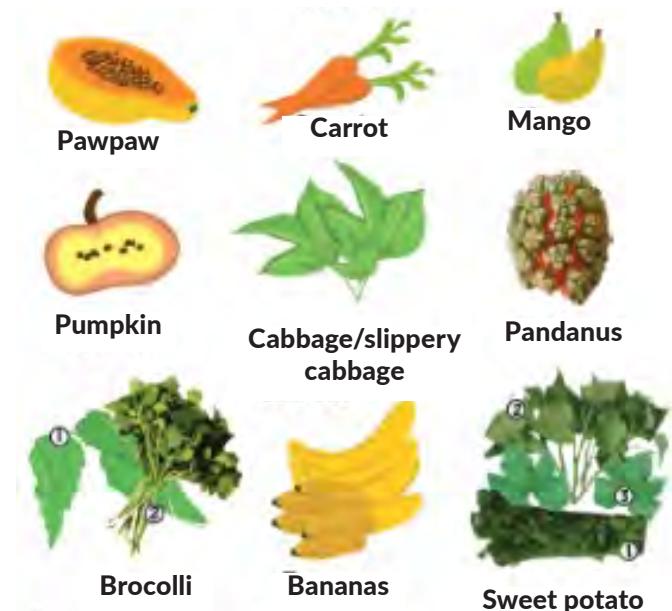
Animal-source foods are especially good for children, to help them grow strong and lively



Peas, beans, lentils, nuts and seeds are also good for children



Dark-green leaves and yellow-coloured fruits and vegetables help a child to have healthy eyes and fewer infections



Offer your child nutrient-rich food

Component 2. Counselling on nutrition

Good complementary food should be energy-rich:

Your child's diet should be nutrient-rich. It should include a variety of complementary foods. Each is the source of important nutrients.

Group 1. Animal source foods

These help your child grow strong and active.

- They are rich in many nutrients, including proteins and iron, and are the best source of zinc, which helps to prevent illness.
- Animal meat and fish, and organs such as liver, are a source of iron which strengthens the blood.

Infants need protein and iron to:

- make new blood
- help growth and development
- help the body fight infections and sickness.

- Eggs are rich in vitamin A, and yoghurt and other milk products are a good source of vitamin D.

Group 2. Peas, beans, lentils and nuts

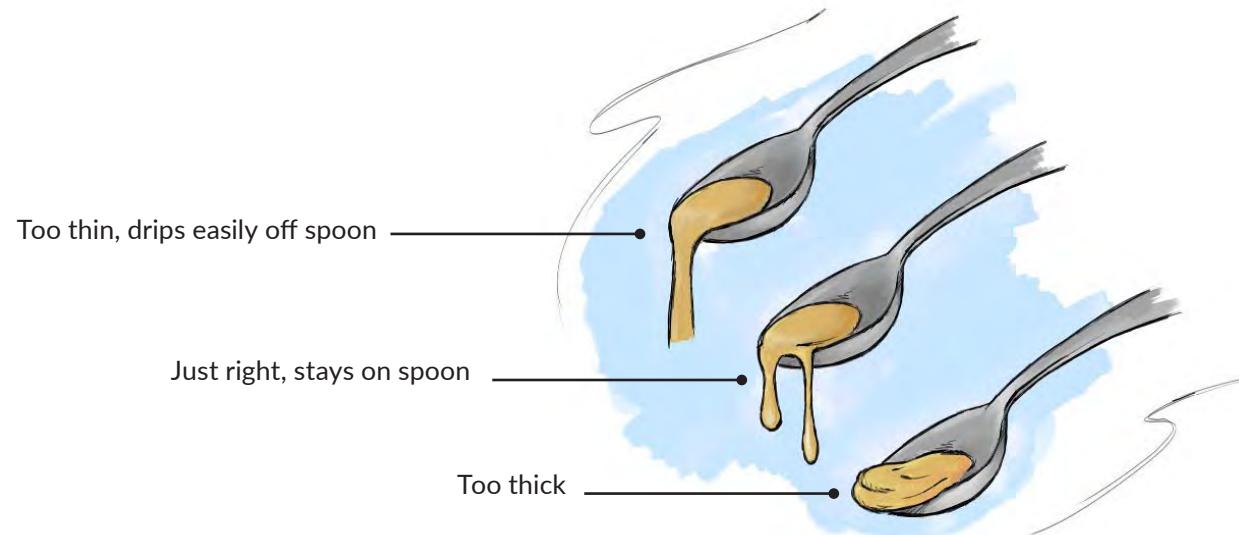
A good source of protein and iron. Lentils and beans can be used to replace meat and fish when they are unavailable. Nuts and seeds are good sources of protein and fats.

Group 3. Dark leafy green vegetables, fruits and legumes

They contain iron, though in smaller amounts than animal foods, and are a source of zinc. Dark leafy green and orange/yellow vegetables and fruits such as banana, mango, mandarin and oranges contribute vitamin A and vitamin C to the diet.

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition



Energy-rich
Don't use bottle to feed the infant



Safe and hygienically prepared food

Component 2. Counselling on nutrition

Good complementary food should be energy-rich

By the time they are six months old babies need to learn to eat thick porridge and pureed/mashed foods.

These provide the child with more energy than thin or liquid food.

Prepare your infant's food so it stays on a spoon. Thin soups and cereals fill the stomach but do not provide enough energy for a growing child. Food should not be so liquid it spills off the spoon, but nor should it be very thick.

Safe and hygienically prepared

- wash your hands before preparing food
- wash vegetables and fruits before cooking or offering them
- wash cooking utensils
- food for infants should be freshly prepared
- food for infants should be well-cooked
- food for infants should be mashed with a fork and not in a mixer
- avoid salt, spices, sugar or preservatives in your infant's food.
- cover food to keep away flies.

To ensure adherence to the advice and that the infant takes all nutrients needed, you should know which foods are locally available to advise the mother

Caring for health and development of infants aged six months up to one year at home
Component 2. Counselling on nutrition



Continue breastfeeding your baby and introduce
complementary food when s/he reaches six months of age

Component 2. Counselling on nutrition

Introducing complementary foods

- Introducing complementary foods to an infant that has been exclusively breastfed may be difficult at first.
- All babies are different. They will start eating foods in a different order and at a rate that is right for them.
- Choose a time when your baby is happy and you are calm to start offering food to your baby. Make sure you have time to focus on her/him.
- Introduce new foods one at a time, for 4–5 days, before introducing another new food. That way you will know if a new food causes an allergy. If several new foods are introduced at once, it will be hard to know which food caused the allergic reaction.
- Start with pureed food. Offer 1–2 teaspoons before breastfeeding. When babies are hungry they accept new foods more easily. When the baby is used to new food you can give the food after breastfeeding.
- Start offering complementary foods once a day and slowly build up to three times a day. Offer more food as your baby grows.
- It is normal for babies to refuse new foods. Sometimes it can take 10 or more attempts at offering a food before baby will accept it.
- Babies know when they have had enough and may turn their heads away. If this happens, offer the baby food later rather than forcing them to keep eating.
- Always supervise babies when they are eating.

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition



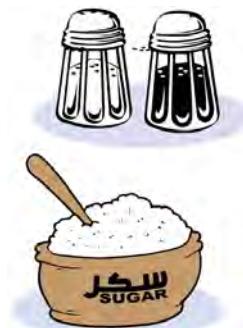
Don't start complementary food when the infant is sick



Don't feed the infant with a bottle



Don't force your infant to eat



Don't add salt, pepper or sugar to child's food



Don't give soda drinks and sugared fruit juices

Component 2. Counselling on nutrition

Do's and don'ts of nutrition

- Do not start complementary food when your infant is sick
- Do not add salt or sugar: they can cause tooth decay and place an extra load on baby's small kidneys
- Do not force the infant to eat more: instead, gradually encourage
- Avoid the use of the bottle to offer food to infants
- Do not offer soda drinks or sweetened fruit juices
- Do not offer fruit juices, even fresh ones: they have a high sugar content and no fiber; instead offer whole fruit
- Do not offer hard foods like whole nuts, seeds, corn chips, raw carrot or chunks of apple: they may cause the infant to choke
- Check fish for bones, and remove them before giving them to the child.

Caring for health and development of infants aged six months up to one year at home
Component 2. Counselling on nutrition

Type of food	6 months	8 months	10 months	1 year
Cereals	XXX			
Fruits 	XXX			
Vegetables 	XXX			
Egg yolk 	XXX			
Poultry, meat and fish 	XXX			
Legumes 		XXX		
Yoghurt and white cheese 	XXX			
Egg white 				XXX
Cow's milk 				XXX

Component 2. Counselling on nutrition

Offering complementary food to the infant

- Continue breastfeeding your child on demand as much as s/he wants day and night.
- At this age the child's stores of iron are insufficient, so start with a single iron-rich pureed food like egg yolk, cereals with added iron, or cooked and pureed meat, poultry, fish and legumes.
- Begin adding a range of fruits, vegetables, cereal grains and dairy foods (e.g. yoghurt, cheese and custard) in any order.
- Drinking plain water is a good habit to encourage early. Begin offering cooled boiled water from a cup. Breast milk and water are the only fluids your baby needs.
- Food of your baby should be well cooked.
- Babies have an increased risk of food poisoning. Make sure food is freshly prepared clean and stored correctly. If not kept in a refrigerator food should be given to the child within two hours of preparation. Keep prepared food in your fridge for no more than two days.
- The amount of food baby needs will change from day to day depending on growth and activity levels. Gradually increase the amount.
- Cow milk should not be given as a drink until 12 months of age. It can cause allergies in some children if introduced early.
- Egg white is an allergy trigger and should not be given until 12 months of age, because it is an allergy triggering nutrient.

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition

Food	How much per meal	How often daily	Snacks	Consistency
 Breastfeeding	As much as the infant wants	On demand		
 Pureed fruits and vegetables Pureed poultry, meat or fish Pureed egg yolk, yoghurt or cheese	 Start with 2–3 teaspoons, gradually increase as child gets used to taste and texture	Once or twice		Pureed soft food
 Mashed food, fruits and vegetables, and animal source foods	 ½ cup (250 ml)	2–3 meals  depending on the child's appetite	 1–2 snacks	Thick porridge, mashed with a fork not in a mixer, that stays on spoon 
 Thick porridge	 ¾ cup (475 ml)	3–4 meals  depending on the child's appetite	 1–2 snacks	Mashed with fork not in a mixer, or finely chopped that infant can pick up 

Component 2. Counselling on nutrition

Varieties and amounts of food

- The first food given to your baby should be well cooked and pureed.
- Adding breast milk or clean water helps make foods smooth and mushy.
- Over the next few months, vary the texture of foods from smooth, to a fine mash, to lumpy mash and, by 11 months, finely chopped food. Offering different textures of food is good for jaw and mouth development.
- At six months start introducing one or two types of nutrients every four or five days, then introduce new types gradually. Give 1–2 teaspoons once or twice daily and then slowly build up, as the child accepts new tastes, to three times a day during routine meal time. You can start with egg puree, pureed potato, pureed chicken and vegetables.
- By the age of 7–8 months increase the amount to half a cup three times daily at routine mealtimes, moving food from before to after breastfeeding. Change the texture of food to become finely mashed. Use a fork. Do not mash in a mixer. Adding breast milk or water helps obtaining good mash. At this age you can add meat.
- By the age of 9 and 11 months add new types of food, increasing the amount to three quarters of a cup three times a day. Change the texture to lumpy mash or finely chopped. At this age you can start introducing legumes.
- Offer the child 1–2 snacks a day. Fruit and yoghurt make good snacks.
- Cooled boiled water, expressed breast milk or formula can be offered from a cup.
- Offer a mixture of foods at mealtimes from the three food groups daily: each day give a dark green vegetable or yellow-coloured fruit and an animal source food in addition to staple foods (rice, bread, beans, potato, etc), in enough amount.
- Add animal source food daily in as many meals as possible. Milk, fish and eggs are excellent for infants because they are high in protein and easy to eat.
- Give the child cooked pureed fruit (e.g. apples) or raw pureed or mashed fruit (banana). Never give fruit juice. Juices have a high sugar content and no fiber which is important to avoid constipation.

In order to be able to counsel the mother on the amount of food to be given at each meal gather items that you will need to demonstrate the quantity of food the infant needs (bowls common in the community), and advise according to age.

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition

Eggs:



Hard boil the egg



Peel the egg



Separate egg yolk
Mash with fork



Add milk or water



Give small bites and keep trying if baby rejects it



Chicken:



Use fresh breasts or thighs



Pound raw chicken



Pound raw chicken add
to yoghurt or water



Cook chicken well



Blend it to make puree

Beans:



Soak beans in water overnight



Cook until tender



Peel and blend or squeeze/mash with a fork



Component 2. Counselling on nutrition

How to prepare pureed food

Egg puree	Meat puree	Legume puree
<ol style="list-style-type: none"> 1. Hard boil a whole egg. Make sure it is completely cooked. Do not give raw or undercooked eggs: they may contain salmonella which can cause the baby to become seriously ill 2. Peel the egg and separate egg yolk 3. Mash the egg yolk with the back of a fork into a smooth puree 4. Add liquid (breast milk or water) for a smoother texture that is easy to eat. Stir in the liquid thoroughly. If you want the eggs to be thinner add a little more liquid until the consistency just stays on the spoon 5. Feed the egg to your baby in small bites 6. Keep trying if the baby doesn't eat the egg right away. 	<ol style="list-style-type: none"> 1. Start with chicken or turkey as your baby's first meat. Use fresh chicken as soon as you buy it. Do not thaw chicken you have in freezer as it can expose baby to harmful microbes 2. Pound raw chicken breasts or thighs and cut them into cubes. Add them to a saucepan with yoghurt or water 3. Cook chicken for 15–20 minutes. Make sure the chicken is well cooked but not overcooked. If it gets too tough or dry it will be hard to puree. Make sure it does not have any trace of pink. Let the cooked chicken cool for 10 minutes before pureeing it 4. Transfer the chicken and cooked liquid into a food processor or blender. Blend until smooth and chunk-free. For a thinner consistency add more liquid 	<ol style="list-style-type: none"> 1. Spread out dried beans and remove stones and other debris 2. Wash the beans in a strainer, cover with water and soak overnight. (fully covered with water) to reduce the length of cooking time. This breaks down the complex sugars that can be hard to digest and cause flatulence. Put soaking beans in the fridge to avoid fermentation 3. Boil beans in new water until they are tender. Beans are done when they are easily squashed between your thumb and finger with light pressure 4. Peel beans and mash them 5. Add liquid to obtain the consistency needed <p>N.B. Lentils do not need to be presoaked like some legumes</p>

It is normal for babies to reject new food the first time they try it. Babies' taste buds develop rapidly and your baby may like a food s/he refused the first time s/he tried it. If your baby does not seem to like the eggs or meat or legumes, wait a few days and try again

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition



Members of the family should play to encourage infant to eat
"open wide for the plane to come inside"



Make meals a time of love, affection and learning



A child needs to learn to eat with lots of patience and encouragement

Component 2. Counselling on nutrition

Active/responsive feeding

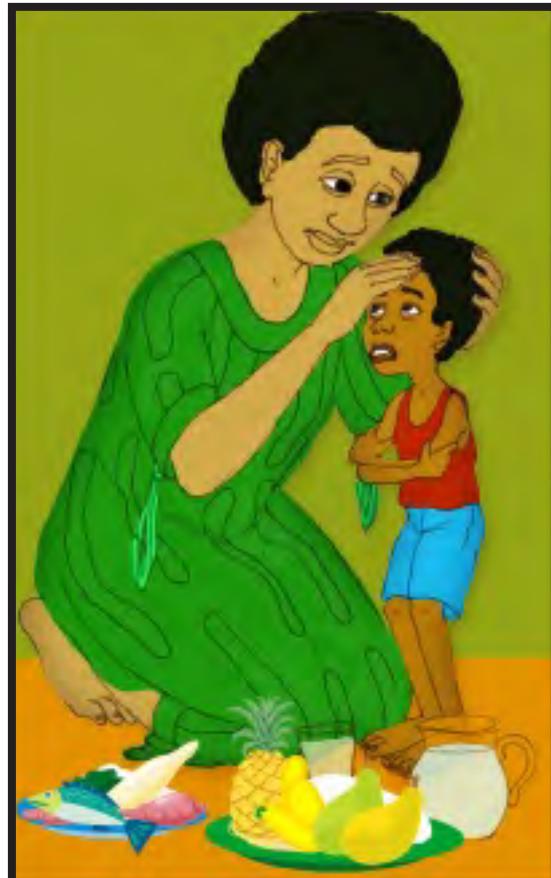
Gently encourage your infant to feed.

- Respond to hunger cues or signs by offering adequate amounts of nutritious food.
- Feed your infant yourself, or the father or other family member (grand-mother, aunt, etc).
- Offer your child healthy food, in the amounts recommended for her/his age.
- Serve the infant in her/his own serving so you know how much has been eaten.
- Make feeding times periods of love, learning and affection. Gently encourage your infant to feed without forcing. You can also play with your baby, for example “open wide for the plane to come inside”. Infants will eat better if feeding times are happy.
- Do not show anger when children refuse to eat, this way your infant will eat less.
- If infants refuse some food try different food combinations, tastes, textures and methods of encouragement. You can taste food first and show that you like it to encourage her/him to imitate you.
- Have regular meal times when the infant can focus without distraction.
- Respond positively to eating, with a smile, eye contact and encouraging words.
- During illness infants may lose their appetite. Feeding requires more patience and encouragement. Offer her/ his favourite foods and small frequent meals so the infant gets the required daily amount of nutrients. Add a teaspoon of oil, margarine or coconut cream to increase the energy content. Breastfeed longer and more frequently.

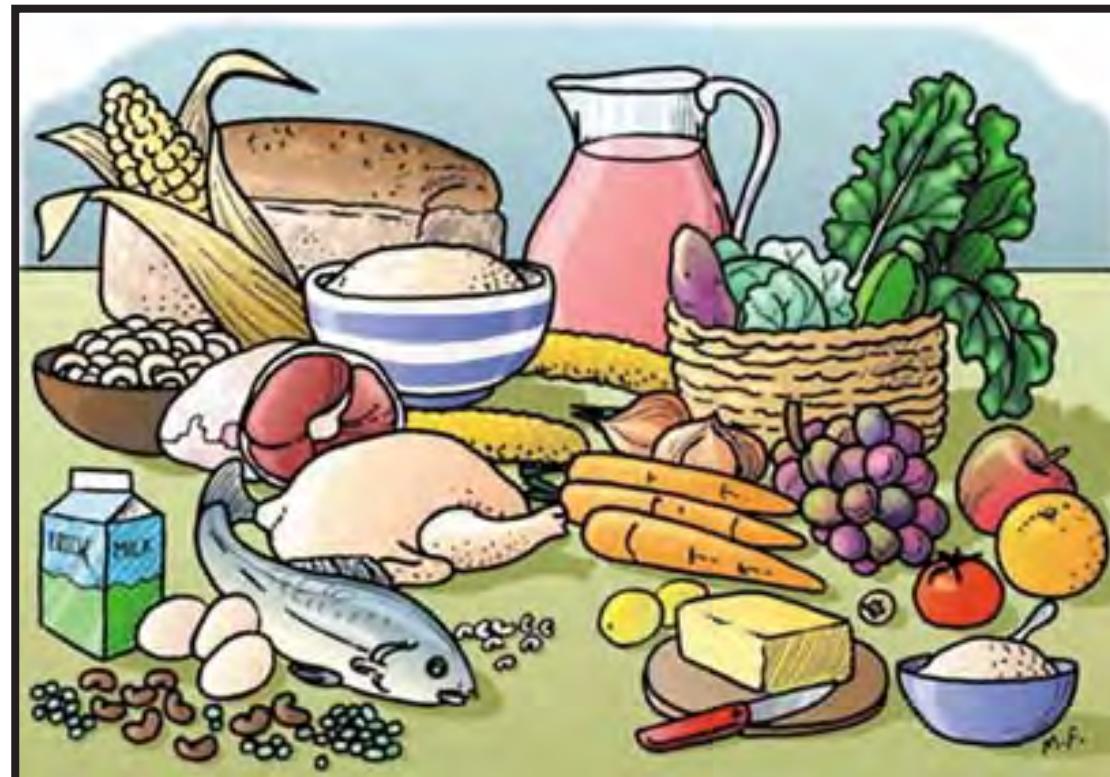
After an illness add an additional meal for 15 days so the infant can catch up on growth.

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition



Gentle encouragement and patience are needed when feeding a sick infant



Offer a wide variety of foods to supply the different nutrients infants need

Component 2. Counselling on nutrition

Breastfeeding/feeding problems

Feeding problem	Counsel
Wants to stop breastfeeding	You should continue breastfeeding. It still provides half of the nutrients your infant needs. Adding complementary food does not mean that you should stop breastfeeding. If you stop breastfeeding, your baby will be deprived of half the nutrients needs. Continuing breastfeeding up to 2 years of age is important. If you go to work, you can express breast milk.
Late introducing complementary foods	Breast milk alone will provide your infant at this age with half of her/his requirements. If a child is not offered complementary foods s/he will not get the second half and will have a nutrient and energy gaps, and the risk of malnutrition and anaemia increases. Start offering complementary foods when your infant reaches 6 months.
The infant eats less because of illness, as they loose appetite, or family stops certain types of food during illness	<ul style="list-style-type: none">• Responsive feeding is especially important when your infant is sick.• Feed your infant well, it helps speed recovery from illness. During illness, your infant needs more energy and nutrients to fight infections and assist recovery and support catch-up growth.• Gently encourage your infant to eat and be patient.• Offer breastfeeding more often, and for a longer time.• Offer your sick child her/his favourite food, more frequently than usual but in smaller amounts.• Do not stop any type of food during illness, to allow your infant obtain all types of nutrients s/he needs.• Add a teaspoon of oil, margarine or coconut cream to increase the energy content of food.• Following recovery provide extra breastfeeding and extra food to help make up for any weight loss.

Caring for health and development of infants aged six months up to one year at home

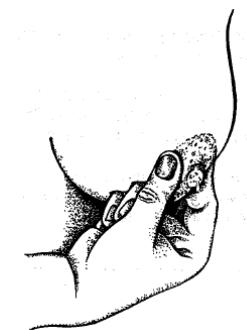
Component 2. Counselling on nutrition



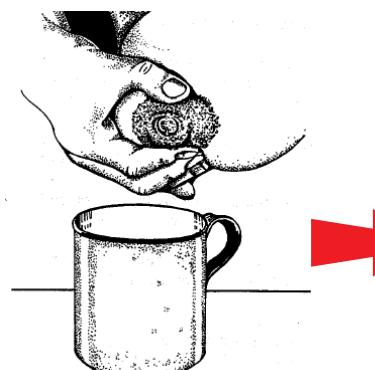
Place finger and thumb each side of the areola and press inwards towards the chest wall



Press behind the nipple and areola between your finger and thumb



Press from the sides to empty all segments



Express breast milk in a clean glass or a glass jar Cover the glass jar



Store at room temperature for 4–6 hours or in a refrigerator for 24 hours



Warm breast milk in a warm water bath

Expression and storage of breast milk

Component 2. Counselling on nutrition

Breastfeeding problems

Breastfeeding and working mothers

You can continue breastfeeding your baby when you return to your work by expressing enough amount of breast milk into a glass or a glass jar.

- Wash the glass or jar with hot water and soap and rinse it well.
- Wash your hands with water and soap.
- To facilitate the process, put warm compresses on your breasts for 3–5 minutes.
- You need to express as much milk as possible to leave for your infant before you go to work. Express milk from both breasts. It may take 20–30 minutes to obtain enough milk.
- Glasses/jars should be covered and stored according to the time of expression: milk expressed first should be given to the infant first.
- Glasses/jars can be kept at room temperature for 4–6 hours and in a refrigerator for 24 hours.
- To give the stored milk to your infant put the glass/jar in a warm water bath. Do not shake the glass/jar or stir with a spoon, just move it gently. Do not let the warm water dilute the milk.
- Feed expressed breast milk to the infant with a cup or with a cup and spoon. Never use a feeding bottle.
- Throw away any remaining stored breast milk.

Advise only if the mother is working and wants to stop breastfeeding or to start giving additional artificial milk.

Note. If in hot weather, preferably store breast milk in a refrigerator

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition



Don't force infant to eat and don't shout at her/him



Milk and water are healthy drinks for your infant

Component 2. Counselling on nutrition

Breastfeeding/feeding problems

Feeding problem	Counsel
Limited variety of foods	<p>Add different types of foods so your infant gets all the nutrients s/he needs:</p> <ul style="list-style-type: none"> • Animal source foods will provide iron (blood stronger), protein(develop healthier and stronger) and zinc (prevents illness. Eggs will provide vitamin A (important for eyes and brain). • Beans, peas and seeds provide proteins, fats and zinc. • Green and orange vegetables and fruits provide vitamins A and C.
Small amount of food and few meals	If you do not provide the amounts of food indicated for your child's age, s/he will develop malnutrition, become weak and fall sick more often.
Forcing the infant to eat	Forcing your infant to eat and shouting may result in the infant eating less. Feed your infant responsively and make feeding times periods of love and affection this will help infant eat better
Not giving snacks, or snacks given too close to meal time	The small stomachs of children fill up fast, and children burn energy quickly. Snacks between meals give growing bodies the nutrients and hydration they need. Fresh fruit and vegetables are good choices. Snacks should be timed to manage your child's hunger and boost nutrition. Do not give snacks too close to the main meal, as your infant will not be able to eat the main meal.
Not giving enough fluids	<p>Exclusively breastfed infants under 6 months of age do not need to take other water and fluids.</p> <p>As your infant reaches 6 months of age, s/he should be given small amounts of water (healthy for infants) that will not replace food or breastfeeding.</p> <p>Give only small amounts during mealtimes and the rest at the end.</p>
Giving soda, sweetened fruit juices, tea and coffee	<p>Intake of sweet drinks leads to weight gain, poor oral health, and dental cavities, due to the high sugar content and acidity.</p> <p>Too much soda means missing the calcium children need from milk to build strong bones and teeth. For good oral health encourage children to drink plain tap water throughout the day.</p>
Feeding is not active	Encourage your infant to eat, offer her/his own serving with adequate food and feed her/him yourself. Active feeding will improve your infant feeding.
Feeding with a bottle	Feed your infant with a cup and spoon. Bottles are difficult to clean and can pass germs which cause illness.

Caring for health and development of infants aged six months up to one year at home

Component 2. Counselling on nutrition



If meal is mostly liquid soup



Add milk powder, liquid milk, finely grounded roasted peanuts, margarine, ghee, oil to improve its quality



Component 2. Counselling on nutrition

Breastfeeding/feeding problems

Feeding problem	Counsel
Food too liquid	<p>Thin, liquid food is seldom energy-rich. If the food of your infant is not energy-rich, infants will not grow stronger if they do not take enough nutrients, even if they consume the quantity indicated for their age. The food must be energy-rich.</p> <p>Prepare your infant's food so that it stays on the spoon. It should not be overly liquid (spills off the spoon), nor should it be too thick.</p> <p>Thin soups and cereals fill the stomach but do not provide enough energy for a growing child.</p>
Prepared food is liquid soup with too few ingredients (few beans or vegetables)	<p>You can improve your child's food by adding any of the following to the liquid soup:</p> <ul style="list-style-type: none">• a spoonful of milk powder, or• liquid milk• finely ground roasted peanuts, especially if the meal is made up with vegetables only.• a spoon of ghee or oil.

Caring for health and development of infants aged six months up to one year at home

Component 3. Counselling on caring for hygiene

Bathe your infant in a baby tub



Get everything ready in advance



Do not use adult tub for young infants



Pour a little of warm water in the tub



Test water temperature by dipping in an elbow



Lay young infant in the tub feet first



Begin washing the baby



Wash genitals last
For girls: start at the front and gently wipe backwards.
For boys: gently rinse the genital area with water



Wash hair at the end



Dry the infant, put on a nappy and dress infant quickly

Component 3. Counselling on care for hygiene bathing

Avoid bathing when the infant is hungry or straight after feeding, to avoid spitting in the tub. Make bathing special and fun time between you and your infant that can add to her/his physical, mental, and emotional growth. If your infant likes the bath and finds it relaxing you can use bathing as a way to help settle her/him for sleep.

Use a bigger tub than that used for younger infants but do not bathe your infant in an adult tub, s/he may slip and drown.

1. Get everything ready in advance: the tub, a cup for pouring water, baby soap, two washcloths, cotton balls for cleaning baby's eyes and ears, towels, clean clothes and a clean nappy and a few bath toys for the baby to play with.
2. Pour a small amount of warm water in the tub, infants should never be submerged in water. Test water temperature by dipping in your elbow. Never leave your infant alone in any depth of water. S/he can fall over and drown in a small amount of water. You should stay with your infant throughout bath time.
3. Place your infant in the tub feet first. Keep one hand supporting the back, neck and head as you carefully lower the infant into the tub. Continue supporting the baby throughout the bath with the non-dominating hand, and use the other hand to wash her/him. To keep baby warm, pour warm water over her/his body throughout the bath.
4. Use a soft washcloth to gently wash the face, body, arms and legs and cotton balls to wipe the infant's eyes and ears. Start with the face then move to the dirtiest parts. Clean genitals: for girls, wet a cotton ball, hold the legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water while bathing.
5. Wash the hair: lean the infant on the back and gently pour water onto hair and scalp. There is no need to use shampoo. It may strip the natural oils which keep the scalp healthy. If you do use baby shampoo, use your hand to protect the eyes from being irritated. Before rinsing, check again that the temperature of the poured water is not too hot.
6. Take out of the tub and dry quickly with a towel.
7. Put in a clean diaper and clean clothes.

Your infant needs constant supervision when bathing. If you have to leave for any reason, wrap the child in a towel and take her/him with you.

Caring for health and development of infants aged six months up to one year at home

Component 3. Counselling on caring for hygiene

Change diaper regularly



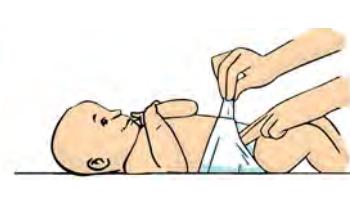
Wipe bottom with a damp cloth
For girls, clean genitals from
front to back
For boys, gently rinse with
water



Give baby some diaper-free
time to air the skin to prevent
rash



Put on a new diaper



Fasten the diaper



Dress your infant



Wash your hands



Trim your infant's nails



Clean your baby's nose



Be careful not to stick anything inside baby's ear.
It can cause damage.

Component 3. Counselling on care for hygiene

Keep your infant clean

- **Face, neck and hands need cleaning several times a day**

Infants put their hands in their mouths and can spread germs.

- **Change diapers regularly and keep diaper area clean**

For girls, wet a cotton ball, hold the legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water.

- **Trimming fingernails**

Always keep fingernails clean. Dirty nails carry germs which can cause disease when infants suck their hands. Always keep your infant's fingernails trimmed or the infant can scratch and hurt her/himself. The best time to trim nails is when your infant is asleep. Use appropriate scissors to cut nails without hurting the infant. Do not cut the fingernails too deep, it can hurt your infant.

- **Cleaning ears**

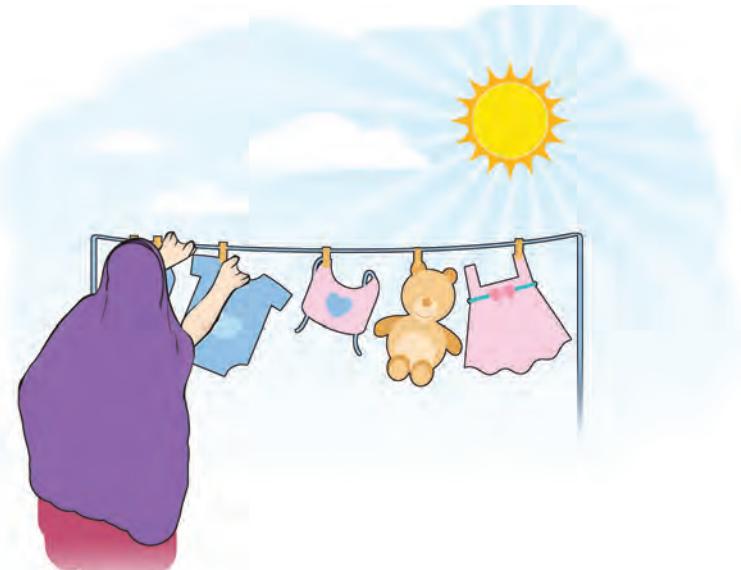
Clean ears gently. Use a cotton wool ball to wipe behind and around the ears. Never insert cotton earbuds into the ears. It may damage the eardrum.

- **Keep infant's nose unclogged**

Clean dried mucus in the nose gently, with a damp soft cotton cloth twisted to form a point.

Caring for health and development of infants aged six months up to one year at home

Component 3. Counselling on caring for hygiene



Wash your baby's clothes and toys and hang them in the sun, it helps killing germs

Component 3. Counselling on care for hygiene

Keep your infant clean:

- **Clean eyes**

Clean eyes to prevent eye infection. Gently remove dried mucus with a soft damp cloth or soft cotton ball. Moisten a cotton wool ball with warm water and gently clean the eyelids, wiping from inner to outer eye. Use a different piece of cotton wool for each eye.

- **Keep toys clean**

Regularly wash toys with plain water, and wipe them using a clean tissue paper or cloth to avoid infection. At this age, infants will reach for things and put them into their mouth.

- **Keep clothes clean**

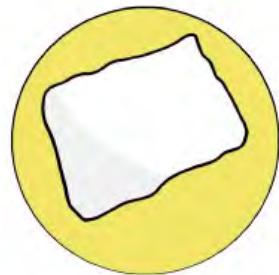
Remove dust and any substances that may irritate the infant's delicate skin. Hang clothes in the sun, it helps killing germs.

- **Sanitize the home**

Clean your house to limit exposure to harmful germs and microbes. Keep your home free of flies and mosquitoes to avoid diarrhoea and malaria. The child should sleep under a mosquito net. Do not sweep and dust close to your infant. Dust has allergic properties and carries microorganisms. Ask family members not to smoke inside the house.

Caring for health and development of infants aged six months up to one year at home

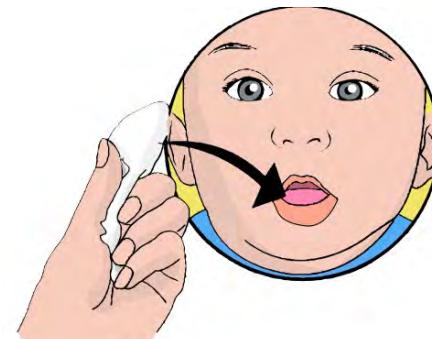
Component 3. Counselling on caring for hygiene



Prepare clean cloth or gauze



Wash your hands before
cleaning your infant's mouth



Wrap washcloth or gauze
around your finger



Place your infant
face up in your lap



Put your finger near the
infant's mouth



Gently put your finger
in the infant's mouth



Rub the lower and upper gums



Clean gums

Component 3. Counselling on care for hygiene

Care for mouth and tooth hygiene

Infants usually get their first tooth between six and eight months. It is important to care for infants' teeth from the beginning. This healthy habit can prevent or reduce tooth decay.

Start caring for your baby's gums well before the first tooth appears.

- Gather the necessary materials. Prepare a clean washcloth or clean gauze which fits over a finger.
- Wash your hands with soap and water before cleaning your infant's mouth to avoid spreading germs.
- Wrap the washcloth or gauze around your finger. Dampen it with water.
- Lay your infant face up in your lap, with the head close to your chest so you can look directly into your child's mouth.
- Put your finger near the infant's mouth. Your infant will slowly open her/his mouth as s/he thinks that you are offering food. Because this is new to your infant be patient. Don't give up if your child doesn't open her/his mouth straight away.
- Gently put your finger in the mouth. Rub the upper and lower gum lightly. Once the teeth come through, clean the gums and the front and back of the teeth. You may want to talk to your child or have a favourite toy on hand to distract during the cleaning. Reassure your infant with a smile. It is natural for your infant to bite your finger when you try to put it into her/his mouth.

Determine a set time to clean your baby's mouth. Repeat the process twice a day (in the morning and before bed).

Caring for health and development of infants aged six months up to one year at home

Component 4. Counselling on developmental milestones

6-month-old infant



Begins to sit unsupported

7-month-old infant

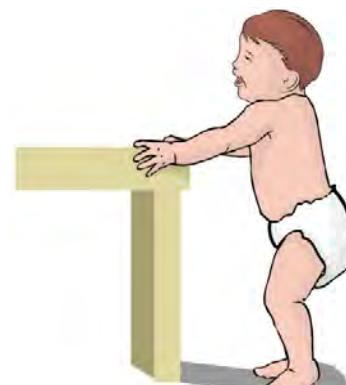


Sits unsupported

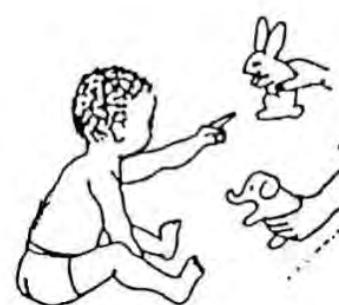
9-month-old infant



Crawls



Stands holding on



Uses fingers to point at things



Likes playing peek-a-boo

Component 4. Counselling on developmental milestones

You need to observe how your child plays, learns, speaks, acts, and moves offers important clues about his or her development.

You should counsel families on:

- Why development is important.
- Meaning of developmental milestones.
- Why following them is important.
- What are the developmental milestones of this age.
- If there is a delay, counsel them to see a doctor.

Between 6 and 9 months	At 9 months
<ul style="list-style-type: none">• Sits without aid by seven months• Rolls over in both directions (front to back, and back to front)• Recognizes familiar faces and begins to know if someone is a stranger• Begins to say consonant sounds• Brings things to her/his mouth	<ul style="list-style-type: none">• Crawls• From lying, can move into a sitting position• Able to stand if there is something to hold on to• Passes things smoothly from one hand to another• Understands “no”• Makes sounds like mamamama and bababababa• Plays peek-a-boo
<p>Vision</p> <ul style="list-style-type: none">• Shows curiosity and tries to grab things that are out of reach	<p>Vision</p> <ul style="list-style-type: none">• Watches the path of something as it falls• Uses fingers to point at things• Looks for things s/he sees you hide
<p>Hearing</p> <ul style="list-style-type: none">• Responds to sounds by making sounds• Responds to own name	<p>Hearing</p> <ul style="list-style-type: none">• Copies sounds and gestures of others

Caring for health and development of infants aged six months up to one year at home

Component 4. Counselling on developmental milestones

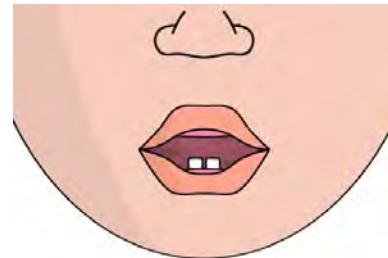
HELP RELIEVE TEETHING PAIN



Massage child's gums



Press cold to the gums



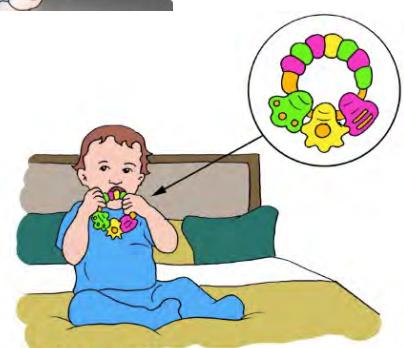
Baby's first tooth



Chill foods



Wash your hands



Use a teething toy



Sing to soothe your child



Rock your child



Breastfeed your child

Component 4. Counselling on developmental milestones

Teething

Teething is a normal part of infants' development. The first tooth may appear between 6 and 8 months.

Teething can cause pain and discomfort due to the swelling of gums 3–5 days before the tooth comes through. Pain can be stressful for your baby: s/he may be hard to settle during sleeping time, especially at night, may drool more, chew fingers or toys to help relieve the pain, rub gums together, pull on ears, rub chin and cheek, and lose appetite. These symptoms disappear as soon as the tooth breaks the skin.

Teething can also cause the infant's temperature to go up. Higher temperatures during teething are usually due to infection and not because of teething itself.

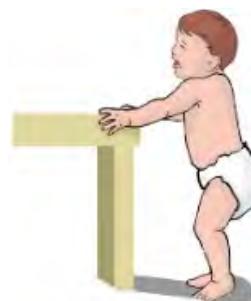
You can relieve teething pain by:

- Massaging the child's gums with your finger. Make sure to wash your hands first.
- Pressing a cold cloth to the gums. Before the tooth erupts, use a clean, cold wet cloth to press on the child's gums. This helps numb the pain and reduce swelling.
- Chill foods. Cold is a good remedy for teething pain. Give your child some cold food before bed. Try yoghurt.
- Use a clean teething toy. Pressure on the gums can help your child when teething. Let your baby chew on a clean hard rubber teething ring or toy.
- Singing: one way to help get your child to sleep is to sing in a quiet, low key.
- Rock your child: if singing does not help in middle of the night, move around with your child and gently rock her/him to sleep.
- Breastfeeding is one of the best ways to give your child comfort and get her/him to sleep.

Caring for health and development of infants aged six months up to one year at home

Component 4. Counselling on developmental milestones

For better health, infants six months up to less than one year should have:



Physical activity is essential for infant's healthy growth and development



Don't restrain baby's movement for more than one hour at a time



Baby requires 12-16 hours of good quality sleep

Component 4. Counselling on developmental milestones

Effect of physical activity and good quality sleep on growth and development

Physical activity

- Make physical activity routine in your infant's life.
- The infant should be physically active several times a day, and in a variety of ways.
 - If the infant is mobile; let your infant crawl, stand up holding for at least 30 minutes- spread these throughout the day.

If the infant is not yet mobile: Place your infant for at least 30 minutes – spread these throughout the day – in a prone position (tummy time) while awake.

Reduce sedentary restraining time to a minimum

- Do not restrain your infant, in prams/strollers or high-chairs, strapped on your back or overwrapped, for more than one hour at a time.
- Sedentary screen time (watching TV or videos and playing on computers) should be avoided.
- When sedentary, your infant should be engaged: storytelling, looking at pictures in a book and playing games like peek-a-boo are recommended.
- Parents should be role models: replace screen time with physical activity, walking to the shops or taking the child to a park to play, and spend leisure time on outdoor activities.

Good quality sleep

- Good quality sleep plays an essential role in your infant's growth and development. at this age, your infant needs 12-16 hours good quality sleep, inclusive of naps with regular sleep and wake-up times.
- Good quality sleep provides the energy your infant needs to be active. A well-rested child is an active child.
- Offer a regular and calm environment in which to sleep.
- Keep electronic screens out of babies' bedrooms.

Caring for health and development of infants aged six months up to one year at home

Component 4. Counselling on developmental milestones

INFANT 6 MONTHS UP TO 9 MONTHS



Give your child clean and safe household items to handle, bang, and drop.

Respond to the sounds your child makes.
Call the child's name, and see her/him respond

INFANT 9 MONTHS UP TO 12 MONTHS



Play peek-a-boo



Show how to wave bye-bye

Component 8. Counselling on care for development (play and communicate with the child)

All family members should play and communicate with the baby, not only you. Bathing and feeding the child, during breastfeeding, dressing the child, are good opportunities to play and communicate with your child.

Age	Play activity	Communication activity
6–9 months	<ul style="list-style-type: none">Give your infant clean, safe household items to handle, bang, move from one hand to the other, and drop. Be patient. S/he enjoys making noise and watching objects as they fall, and learns skills in the handling of objects. This way your infant discovers the world around her/him.Examples of toys: containers with lids, metal pots and spoons, a small ball	<ul style="list-style-type: none">Your infant may not be able to form words yet but learns from what is said to her/himRespond to the sounds your child makes and show interest.Call the child's name, and see how s/he responds
9–12 months	<ul style="list-style-type: none">This is a time when infants explore, and learn about themselves and other peopleHide a favourite toy under a cloth or box. See if the child can find itPlay peek-a-boo, infants like this game.	<ul style="list-style-type: none">Tell your child the names of things (bird in the tree, nose, lip etc.), and peopleShow your child how to say things like bye-bye with her/his handsSample toy: doll with face

Caring for health and development of infants aged six months up to one year at home

Component 5. Counselling on prevention of accidents and injuries



Remove bibs before sleeping



Smoke inside the home may cause suffocation



Don't sleep in same bed with your infant



Infant should sleep in a separate bed

Component 6. Counselling on prevention of accidents and injuries

Suffocation

Causes of suffocation

- The ribbons used to tie bibs around the infant's neck and attached to pacifiers can cause suffocation. Remove bibs before sleeping.
- Infants that sleep in the same bed as their parents are at a risk of suffocation. Parents can roll onto infants during sleep, and they can get tangled in sheets or blankets. Infants should sleep in a separate bed, without siblings or parents.
- Smoke inside the house irritates infants' lungs. If you must use charcoal or wood for cooking do it outside the house.

Tobacco smoke

- Causes lung irritation and may lead to suffocation. Tobacco smoking harms those who smoke and those who inhale the cigarette smoke passively.
- The smell of tobacco smoke remains on clothes and bodies, and irritates the lungs. It is better for the health of the whole family not to smoke tobacco.
- Keep infants away from smokers and places where people smoke.
- Do not smoke inside your home or car, or anywhere near the baby, even when you are outside.
- If you have been exposed to smoke, take a shower and change clothes before touching infants.

Pillows, stuffed toys and blankets

- If your infant sleeps face down a soft surface, s/he can suffocate.
- Keep your infant's bed clear of stuffed toys and soft pillows.
- Always place your infant on her/his side to sleep.

Caring for health and development of infants aged six months up to one year at home

Component 6. Counselling on prevention of accidents and injuries



Good positioning
avoids choking



Poor positioning
may lead to choking



Infants can crawl, grab small objects and put them in their mouth.
Keep small objects away



If infant is choking

- Sit down and lay infant face down along your thighs, supporting the head with your hand
- Give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades

Component 6. Counselling on prevention of accidents and injuries

Choking

Choking is a common cause of injury and death in young children.

Their small airways are easily obstructed.

Causes of suffocation

- Poor attachment to the breast can cause choking. Observe breastfeeding to see positioning and attachment
- Young infants crawl and can reach for objects and grab them, and can put them into their mouths and choke. Keep small objects away from your infant.

If an infant is choking, teach the mother or father to:

- Sit down and lay infant's face down along their thighs, supporting the head with one hand.
- Give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades.

Caring for health and development of infants aged six months up to one year at home

Component 6. Counselling on prevention of accidents and injuries



Place baby gate at the top of the stairs



Remove any objects or slippery things from the floor



Don't leave your infant on a high surface



Baby crawls: do not put hot drinks or any harmful object on tables with long table cloth



Regularly trim the infant's nails to avoid scratches



Do not leave harmful objects on the ground

Component 6. Counselling on prevention of accidents and injuries

Falls

- Never leave toys or other objects on the ground, or leave the ground slippery. Family members can fall while carrying the infant. Your infant may get hurt. Always keep the house tidy, with everything in its place.
- Never leave infants unattended on high surfaces. They can crawl, and may fall and could fracture a bone.

If your infant crawls, s/he may fall down stairs. Fix a wooden gate at the top of stairs to prevent falling.

Wounds

- Never leave pins attached to your infant's clothes. If necessary, use safety pins.
- Trim your infant's fingernails regularly. If they are long and sharp they can cause cuts and scratches.
- Never place hot or harmful objects at the edge of tables where an infant can pull at the tablecloth.
- Infants can reach for and grab objects. Never leave sharp objects in the reach of the child.

Caring for health and development of infants aged six months up to one year at home

Component 6. Counselling on prevention of accidents and injuries



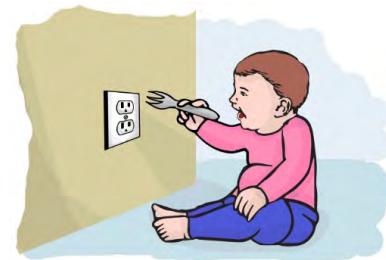
Test water with elbow to avoid scalding



Don't carry or hold an infant while you have a hot drink



Baby crawls: do not leave infant unattended next to source of fire, hot drink or electricity



Component 6. Counselling on prevention of accidents and injuries

Burns

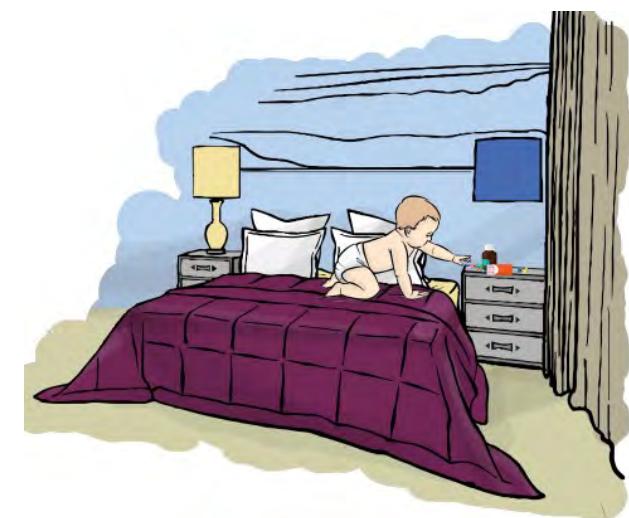
- Using hot water to bathe infants may scald them. Test water with your elbow before bathing your infant.
- Never carry infants while cooking or washing next to containers with boiling water, or while carrying a hot drink. You should keep infants in a safe place, where they can be seen, when you are doing the chores or drinking hot liquid.
- Avoid direct sunlight when it is very hot. Infants can get sunburn.
- Infants can crawl. Never leave your infant unattended where there is a fire, a source of electricity, or hot drinks within reach.

Caring for health and development of infants aged six months up to one year at home

Component 6. Counselling on prevention of accidents and injuries



Don't leave your infant unattended in the tub to avoid drowning



Place medicines, detergents and insecticides out of reach of infants

Component 6. Counselling on prevention of accidents and injuries

Drowning

- Never leave your infant in the bath tub unattended, s/he may drown quickly, even in small amounts of water.
- Get everything ready before bathing your infant.
- Do not be distracted during your infant bath.
- If you have to leave for any reason, wrap your infant and take her/him with you.

Drowning

Infant in this age crawls. Do not leave any medicines, detergents, or insecticides in her/his reach. Place them out of reach of infants (e.g. in a high place).

Caring for health and development of infants aged six months up to one year at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Continue breastfeeding the infant and offer nutrient-rich and safe food



Console the infant when s/he cries

Never discriminate between an infant boy and girl, and between siblings



Component 7. Counselling on prevention of maltreatment, neglect and violence

Maltreatment and neglect negatively impact on brain development during infancy and early childhood, and on the child's subsequent physical, cognitive, emotional and social growth.

Nutrition

- Continue to breastfeed your infant, and provide healthy and nutrient rich food.

Emotional development

- Crying means your infant feels unsafe or is in pain. A responsive parent shows the infant that s/he is loved and cared for. This signals to the baby that s/he is safe and positively affects baby's emotional development.
- Do not discriminate between boys and girls or between siblings in playing and communicating, or in timely care-seeking. To do so negatively affects children's development.

Caring for health and development of infants aged six months up to one year at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Early care-seeking



Immunize the infant



Play and communicate with your infant



Keep your infant safe from harm

Component 7. Counselling on prevention of maltreatment, neglect and violence

Health

- Immunizing your infant prevents illnesses.
- Seek care from a qualified health care provider when your infant does not feel well.
- Rational use of antibiotics: only give prescribed treatments; never administer old opened antibiotics.
- Ensure your infant is clean and has clean clothes. It is an essential part of taking care of her/his hygiene.

Nurturing

- Play and communication stimulates the psychosocial development of your infant.

Shelter and safe living conditions

- A home where your infant is safe from harm, surrounded by a family giving her/him love, attention, and opportunities to learn, and where other siblings are well treated, will have a lasting positive effect on the infant's social, emotional and cognitive development.
- Bad relations between parents distresses infants and the negative experience will last as they grow, affecting social, emotional and cognitive development.
- Never leave infants near open fires, sources of electricity, sharp objects, or toxic substances.
- Do not shout at or hit infants.

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Care-seeking practices. When to seek care. Checking for the presence of danger signs



Unable to drink or breastfeed



Convulsions



Vomits everything

Caring for health and development of children aged one year up to two years at home

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the baby to a health facility

Check for the presence of danger signs

These are signs that indicate a possible critical condition. If any of these signs are present, the child needs to be urgently referred to a health facility.

First sign: Unable to drink or breastfeed

Your child is too weak to be able to drink or to suckle and breastfeed.

Second sign: convulsions

Child's arms and legs become stiff. The child may stop breathing and become blue. There could be a recurring movement of one part of the body, such as twitching of the mouth or blinking of the eyes.

Third sign: vomits everything

If your child is not able to hold anything down at all, all that goes down, comes back up; this is a danger sign.

If your child vomits several times but holds down some fluids, this is not a danger sign.

Give information as listed in the recording form.

Get permission to check the child.

Remember to wash your hands before touching the child.

Check if any danger sign is present. If yes, counsel on urgent referral. If not present, teach the mother the danger signs.

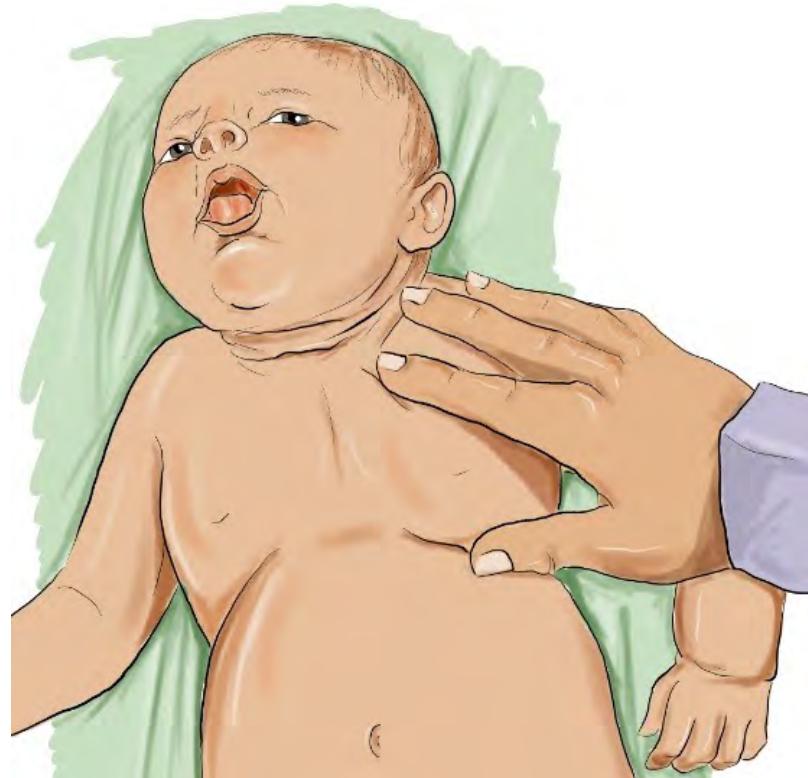
If the mother says the child is unable to breastfeed, or if you are in doubt, check by asking the mother to breastfeed her child.

For convulsions, first ask the mother if the child has had convulsions, and check if infant is convulsing now.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of children aged one up to two years at home.

Component 1. Counselling on family health care practices. Care-seeking practices. When to seek care. Checking for the presence of danger signs



Difficult breathing



Use timer to count breaths

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the child to a health facility.

Check for the presence of danger signs

Fourth sign: fast breathing

Infants often breathe faster than older infants and children, and slower than newborns and younger infants.

If you notice your child is breathing more quickly than normal or that there is difficulty in breathing this is a danger sign that could denote a serious health condition.

You need to take the child urgently to a health facility.

Is the baby fast breathing?

Use a timer to count respiratory rate.

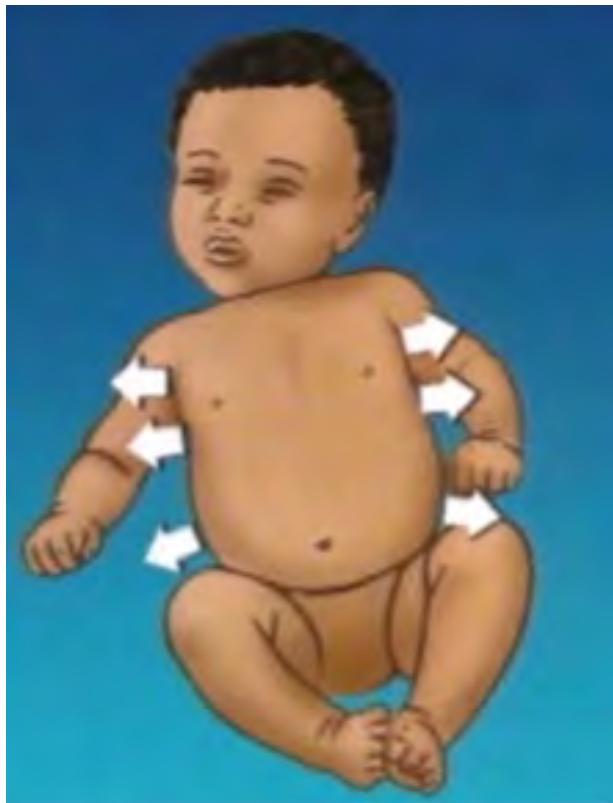
Counting respiratory rate

1. Wait for child to be calm or sleeping. Do not count when baby is breastfeeding or crying, otherwise the count will be incorrect.
2. Make sure there is enough light to see the breathing movements.
3. Gently lift the child's shirt so you can see breathing movements.
4. Watch a few breaths until you are sure when the child is breathing in and out.
5. Start the timer and count breaths for one full minute (until the long beep that marks the end of one minute).
6. If you counted 40 breaths or more, do not repeat the count. The child has fast breathing.

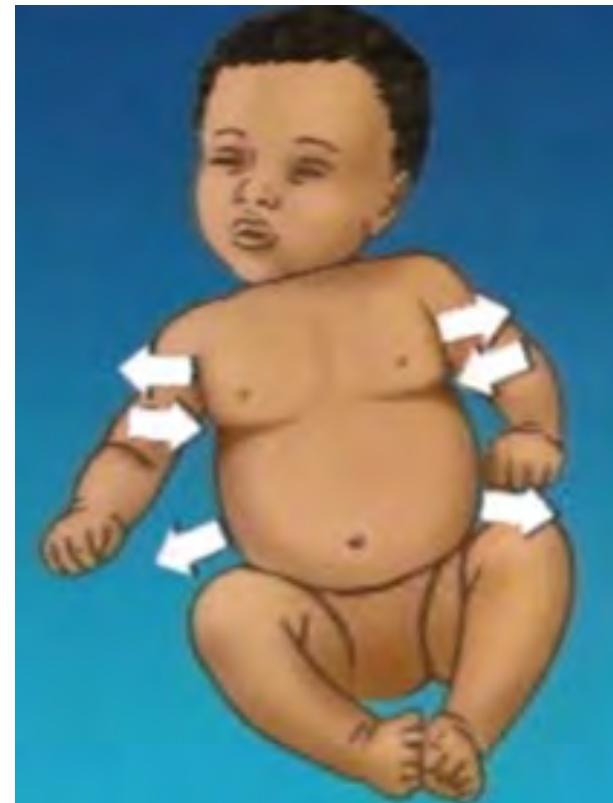
If the child is fast breathing, urgently refer to a health facility.

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Care-seeking practices. When to seek care. Checking for the presence of danger signs



Normal breathing: when child breathes in upper and lower chest walls and abdomen **go out**



Chest indrawing: when child breathes in upper chest wall and abdomen **go out** while lower chest wall **goes in**

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the child to a health facility.

Check for the presence of danger signs

Fifth sign: chest indrawing

If your baby is breathing with difficulty and you find a very deep groove between the chest and abdomen.

This is a danger sign, and the baby has a serious condition and should be taken to a health facility urgently.

Teach the danger signs

Chest indrawing is the groove formed between the chest and abdomen because of the lower chest wall going in when the child breathes in, and the upper chest and abdomen moving out.

How to recognize chest indrawing:

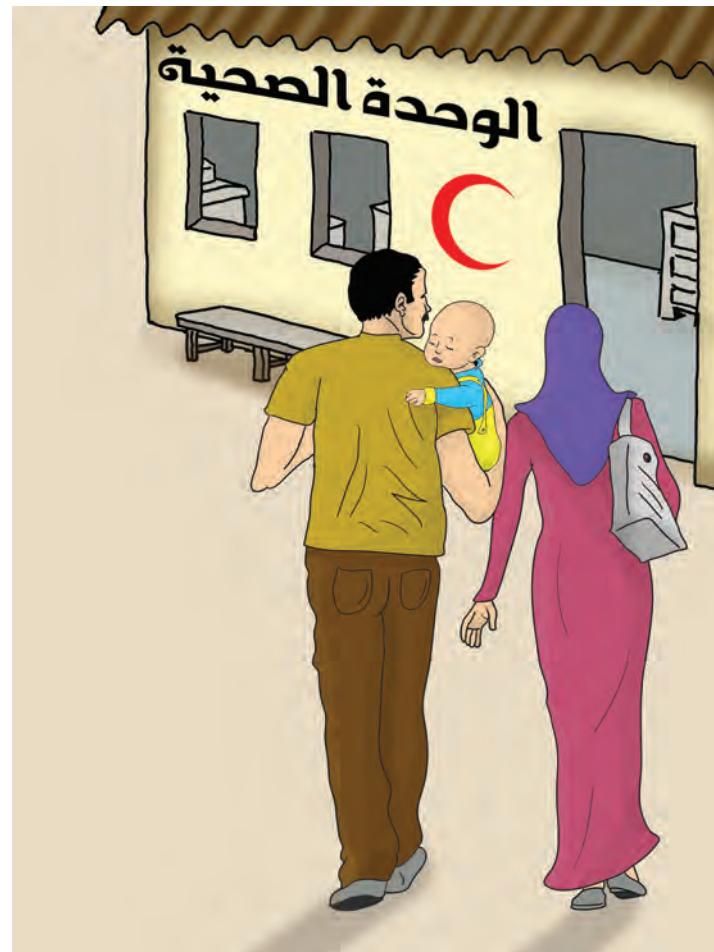
1. Wait for the child to be calm (these movements during crying or breastfeeding are not chest indrawing).
2. The child should not be bent at the waist.
3. Ask the caregiver to raise the child's clothes above the chest.
4. Look at the lower chest wall when the child breathes in. It must be clearly visible and present with every breath.
5. If you are unsure of the presence of chest indrawing, then, decide it is not chest indrawing.

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Care-seeking practices.

From whom to seek care.

IF THE YOUNG INFANT HAS ANY DANGER SIGN, SKIP ALL OTHER TASKS AND ASSIST REFERRAL.



From whom to seek care

Component 1. Counselling on family health care practices

Care-seeking practices

From whom to seek care

- Trained health care providers should be the only trusted source of medical care.
- Do not seek care from untrained sources: they can cause harm to your baby instead of being of benefit.

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Care-seeking practices.

From whom to seek care.



Help to arrange transportation



Ask mother if she has savings



Take your baby to a health facility in a timely way

Component 1. Counselling on family health care practices

Care-seeking practices

From whom to seek care

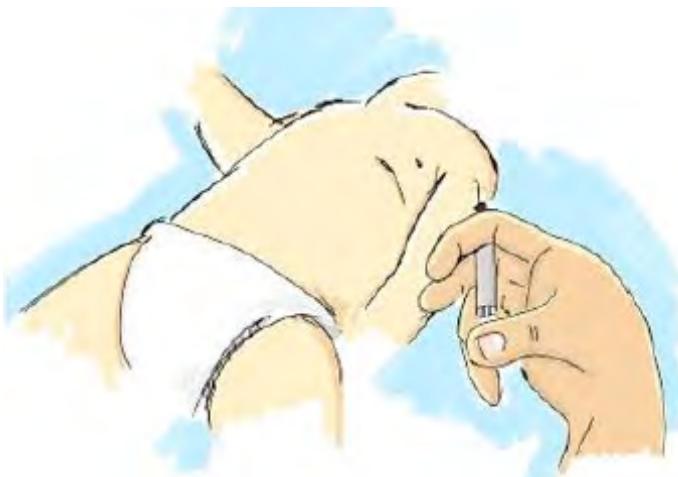
Use good communication skills to explain to families the importance of referral, to convince them and to solve problems.

Counsel them only on the referral difficulty that you identify. Do not talk about difficulties that are irrelevant.

Difficulties	Advice
Fear that the health facility is a place where children often die	If your child is sick and you do not seek care quickly baby may die Timely care from a health facility where there are doctors, supplies and equipment can help sick babies get better Without treatment sick children can easily get worse and die
There is no one to care for the other children or do daily tasks	If the child does not get to a health facility it may risk her/his life. <ul style="list-style-type: none">• Would your husband stay with the other children in such a critical situation?• If not, ask who else (relatives or neighbours) can help with the children and daily tasks?• I can talk to your husband or help contact someone to help
Lack of transport	I will assist in finding means of transport
Lack of money	Do you have any savings? If not, I will help approach community committees or other members of the family
Family wants to take baby to a faith/traditional healer first	A baby showing danger signs needs urgent treatment in a health facility. Delaying treatment may make the child's condition worse.
Mother is alone and she needs permission from husband or a family elder	I can help in contacting the person who can give permission to take the child to a health facility.

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Prevention practices



Measles, mumps,
and rubella (MMR)



DPT (diphtheria, pertussis, tetanus), Hib, hepatitis B



Polio

Component 1. Counselling on family health care practices

Prevention practices

Immunization

Vaccination protects children from serious illnesses and complications such as paralysis, brain damage, blindness and death.

At this age babies should receive booster doses of:

- polio vaccine
- DPT (diphtheria, pertussis, tetanus)
- Hepatitis B vaccine
- Hib vaccine

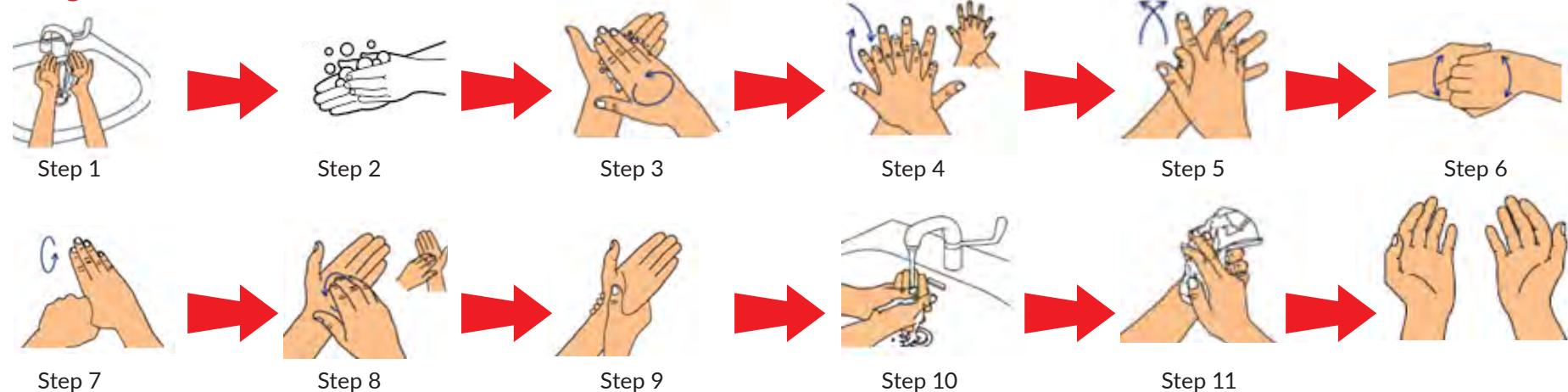
and one dose of vaccine for:

- measles
- MMR

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Prevention practices

1. Washing hands



REMEMBER TURN OFF THE TAP WITH A TOWEL, NOT WITH YOUR HAND.



When to wash hands



Component 3. Counselling on family health care practices

Prevention practices

Hand washing

Hand washing helps prevent the spread of infections. It can prevent major childhood illnesses like pneumonia and diarrhoea, the most common killers of children under five.

Hand washing with water and soap removes germs from hands.

If houses don't have toilets with water supply and basin, advise and assist families to create a place within the home for hand-washing. This should have a wash basin, a container for water, and soap (or a local substitute).

When should you wash hands?

- After changing diapers or cleaning up a child who has used the toilet;
- Before touching the baby;
- After using toilet;
- Before preparing food;
- Before eating;
- Before feeding a child;
- Before and after caring for someone who is sick;
- After blowing your nose, coughing, or sneezing;
- After touching an animal, animal feed, or animal waste;
- After touching garbage

How should you wash your hands?

1. Wet hands with water
2. Rub wet hands on soap, covering the hand with soap
3. Rub palms together
4. Rub back of each hand with the palm of the other hand keeping fingers interlaced
5. Rub palm to palm with the fingers interlaced
6. Rub back of the fingers with the fingers interlocked
7. Reach each thumb clasped in opposite hand using a rotational movement
8. Rub the tips of the fingers in the opposite palm using a circular movement
9. Rub each wrist with the opposite hand
10. Rinse the hands with water
11. Dry thoroughly with a clean towel

Remember to turn the tap off with a towel, not with your hands.

Caring for health and development of children aged one up to two years at home

Component 1. Counselling on family health care practices. Prevention practices



Use an insecticide-treated bednet to prevent malaria in high-risk areas



Antibiotics are only prescribed by trained health professionals



Don't take another person's antibiotics (neighbour, cousin, etc)



Don't purchase antibiotics from a pharmacy without a doctor's prescription



Don't give your child an old antibiotic present at home

Component 1. Counselling on family health care practices

2. Prevention practices

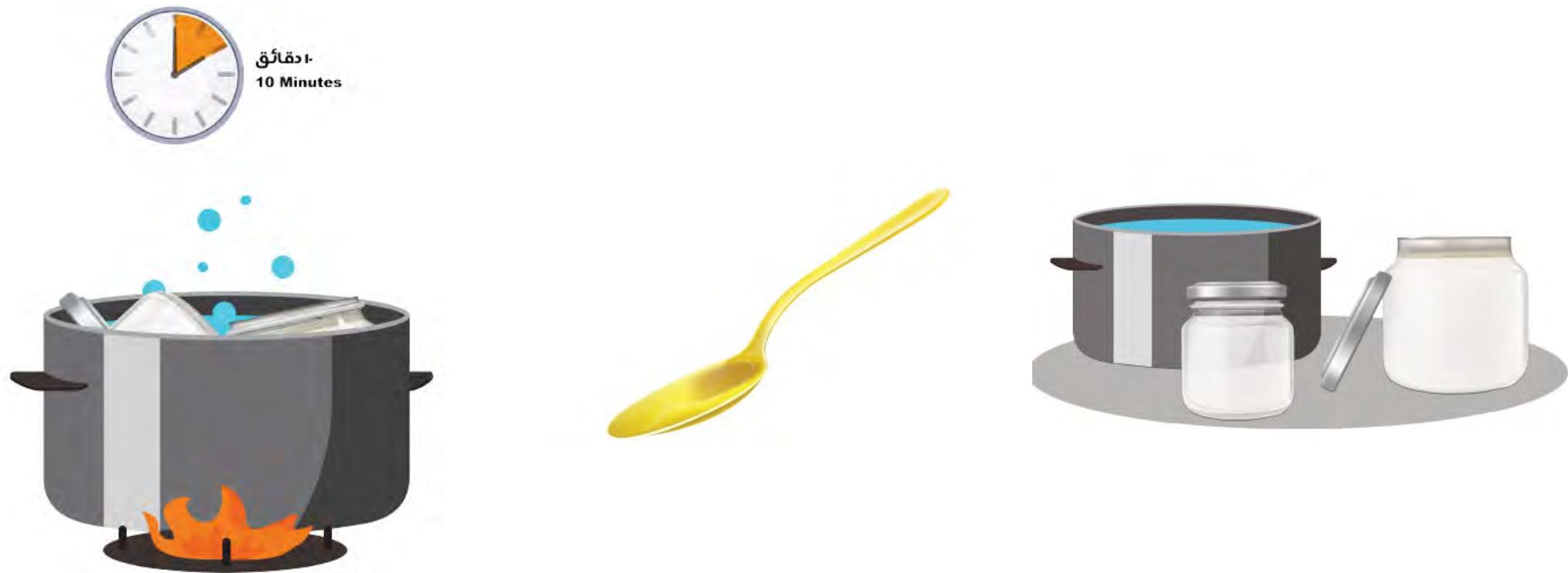
Use of insecticide-treated bednet for prevention of malaria in high-risk areas

Malaria is a serious illness carried by mosquitoes. It is a major cause of death in children under five. Mosquitoes bite at night. You and your child should sleep under an insecticide-treated bednet to prevent the serious effects of malaria.

Rational use of antibiotics

- Antibiotics kill microbes that cause disease and can save the lives of sick children.
- Different diseases require specific types of antibiotic which should only be prescribed by a trained health professional.
- If antibiotics are given to a child who does not need them they can cause harm:
 - The microbe will get used to and resist the antibiotic. The child will then need much stronger antibiotics which may affect the baby's health.
 - Unnecessary use of antibiotics can impair your child's development.
- Do not purchase antibiotics from the pharmacy without a doctor's prescription.
- Do not take old antibiotics found at home or given by a neighbour: the child may not be in need of an antibiotic, s/he may not need this type of antibiotic, or the antibiotic could be old (expired).

Caring for health and development of children aged one up to two years at home
Component 1. Counselling on family health care practices. Prevention practices



Boil water, and thoroughly clean spoons and utensils

Component 1. Counselling on family health care practices

Prevention practices

Boiling water

Boiling the water kills microorganisms such as bacteria, viruses, or protozoans that can cause disease.

Boiling makes the tap water microbiologically safe. the children at this age eat and drink besides breastfeeding; boiling water, cleaning glasses and other tools is crucial.

Bring water to a full rolling boil, let it boil for one minute, and let water cool before using it.

Avoid feeding bottles, use cup and spoon. Clean them carefully before using them for the child.

Give this advice, if there is no safe water in the area and/or If there is a compulsory reason for a mother not to breastfeed advise on boiling water to kill organisms and let water and bottles cool before using them and to clean thoroughly cups and spoons used to feed the child.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



Mothers should continue breastfeeding until the age of two years and feed the child 3–4 times a day

Component 2. Counselling on nutrition

At this age breast milk:

- provides one third of a child's nutritional needs
- continues to protect your child from illness
- helps your child grow.

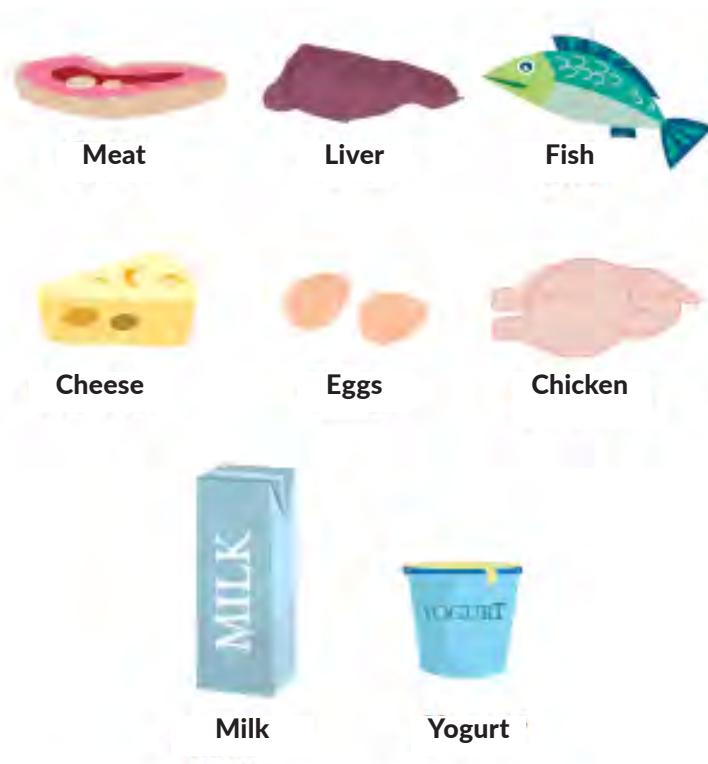
You should not stop breastfeeding because you will deprive your child from its benefits to her/his health.

Continue breastfeeding as often as the child wants until the child reaches two, and offer complementary food to meet the remaining two thirds of your child's nutritional requirements.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition

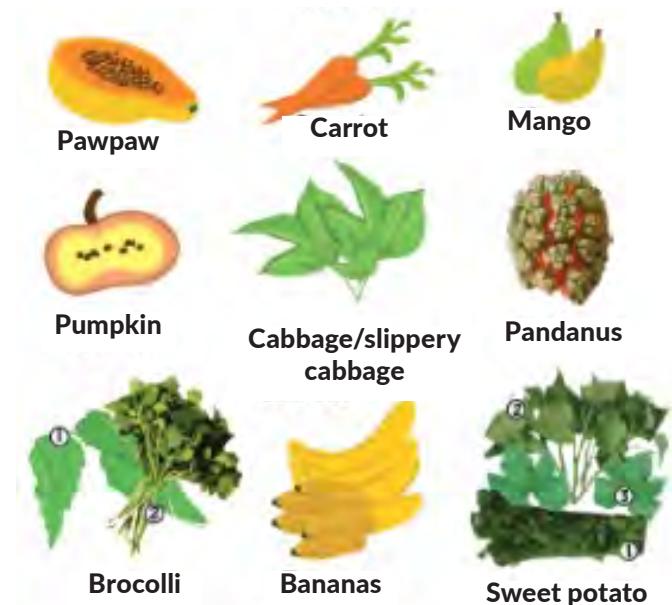
Animal-source foods are especially good for children, to help them grow strong and lively



Peas, beans, lentils, nuts and seeds are also good for children



Dark-green leaves and yellow-coloured fruits and vegetables help a child to have healthy eyes and fewer infections



Offer your child nutrient-rich food

Component 2. Counselling on nutrition

Your child's diet should be nutrient-rich. It should include a variety of complementary foods. Each is the source of important nutrients.

Group 1. Animal source foods

These help your child grow strong and active.

- They are rich in many nutrients, including proteins and iron, and are the best source of zinc, which helps to prevent illness.
- Animal meat and fish, and organs such as liver, are a source of iron which strengthens the blood.

Infants need protein and iron to:

- make new blood
- help growth and development
- help the body fight infections and sickness.

- Eggs are rich in vitamin A, and yoghurt and other milk products are a good source of vitamin D.

Group 2. Peas, beans, lentils and nuts

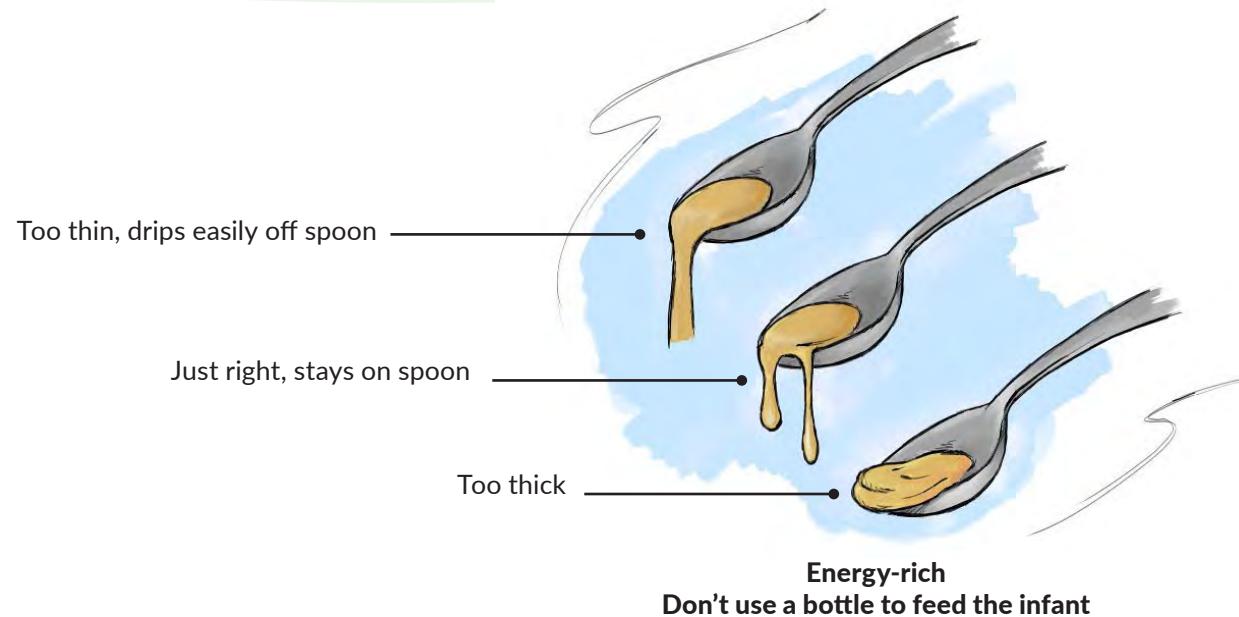
A good source of protein and iron. Lentils and beans can be used to replace meat and fish when they are unavailable. Nuts and seeds are good sources of protein and fats.

Group 3. Dark leafy green vegetables, fruits and legumes

They contain iron, though in smaller amounts than animal foods, and are a source of zinc. Dark leafy green and orange/yellow vegetables and fruits such as banana, mango, mandarin and oranges contribute vitamin A and vitamin C to the diet.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



Safe and hygienically prepared food

Component 2. Counselling on nutrition

Good complementary food should be energy-rich

Your child needs to eat thick foods, finely chopped or mashed if necessary. They provide the energy required for your child more than thin or liquid food. Prepare food so it stays on the spoon. Thin soups and cereals fill the stomach but do not provide enough energy for a growing child.

Your child's food should be safe and hygienically prepared

- wash your hands before preparing food
- wash your child's hands to allow finger food (child to pick food while you feed her/him)
- wash vegetables and fruits before cooking or offering them
- wash cooking utensils
- food should be freshly prepared
- food should be well cooked
- food should be mashed with a fork and not in a mixer
- avoid salt, spices, sugar or preservatives
- cover food to keep away flies.

To ensure adherence to your advice and that the infant takes all nutrients needed, you should know which food is locally available to advise the mother

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition

Offer a mixture of foods at mealtimes



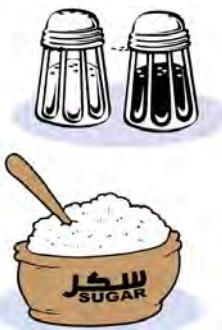
DO NOT



Don't feed the infant with a bottle



Don't force your child to eat



Don't add sugar or salt or pepper



Don't give soda drinks and sugared fruit juices

Component 2. Counselling on nutrition

Offering complementary food to your child

- Give your child an adequate amount of family food chopped or mashed if necessary. It is important to include animal source foods and green and yellow vegetables and fruits, alongside staples such as rice, bread, beans and potatoes.
- Food must be nutritious and given in sufficient quantity.
- Encourage – but do not force – the child to eat more. Showing anger can lead to a child eating less.
- Avoid adding salt and sugar to food.
- Give your child her/his own serving.
- Do not use a feeding bottle. Use a plate and a spoon.
- Avoid soda drinks and fruit juices, even the fresh ones. Fruits contain natural sugars that become very concentrated when made into juice, it is better to give your child the whole fruit. If juice is to be included in your child's diet, limit it to an occasional half cup of no-added-sugar juice.
- Avoid giving junk food. It can lead to long-term health problems such as obesity, anaemia, allergies, and chronic illness. Junk food also leads to constipation, listlessness, and can impact negatively on future school performance.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition

Age	Food	How much per meal	How often daily	Snacks	Consistency
12-24 months	 Breastfeeding	As much as the child wants	On demand		
	 Family food	 1 cup	3-4 times depending on the child's appetite	 1-2 snacks	Chopped or mashed if necessary



Fruit makes a good snack

Component 2. Counselling on nutrition

Varieties and amounts of food

- Breastfeeding should continue as much as the child wants.
- At this age you can give your child egg whites and milk.
- Increase the variety of food offered as the child grows.
- Offer family food, finely chopped or plumpy mashed if necessary.
- Increase the amount of food to one cup per meal. Offer three or four meals a day, depending on your child's appetite. Feed your child at family meal times.
- Ensure your child is receiving nutrients from each food group. Meals should include all colours of food, green, brown, orange, red and yellow. It should include animal source food, vegetables and fruit.
- Offer one or two snacks a day. Mashed fruit, yoghurt and oatmeal are good options.
- Whole fruit contains fiber and helps your child develop chewing skills.
- The food should be solid enough to stay on the spoon.

To be able to counsel the mother on the amount of food per meal, gather items that you will need to demonstrate the quantity of food the infant needs (common bowls, etc.). Advise according to age.

If mother is not breastfeeding, child should receive five meals a day plus snacks, to compensate for breast milk nutrients.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



Play to encourage infant to eat “open wide for the plane to come inside”, show that you like the food



A young child needs to learn to eat with lots of patience and encouragement



Make feeding, times of love, affection and learning

Component 2. Counselling on nutrition

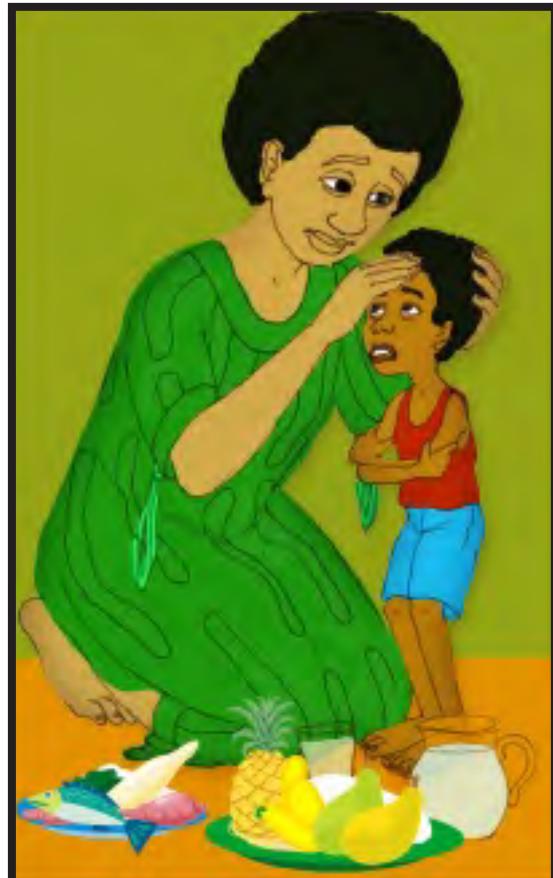
Active/responsive feeding

Gently encourage your infant to eat.

- Offer your child healthy and nutritious food, in the amounts recommended for her/his age.
- Wash your hands and your child's hands before feeding her/him.
- Feed your child yourself.
- Allow your child to pick up food while feeding.
- Serve your child in her/his own bowl so you know how much has been eaten.
- Make meals a time for love, learning and affection. Gently encourage your child to feed without forcing. Infants will eat better if feeding times are happy.
- Do not show anger when children refuse to eat.
- If your child refuses food, try different combinations, tastes, textures and methods of encouragement. You can taste food first and show that you like it to encourage her/him to imitate you. You can encourage her/him also by playing like "open wide for the plane to come inside.
- Have regular meal times when the infant can focus without distraction.
- Respond positively to eating, with a smile, eye contact and encouraging words.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



Gentle encouragement and patience are needed to feed a sick child



Offer your child a wide variety of foods to provide the different nutrients s/he needs

Component 2. Counselling on nutrition

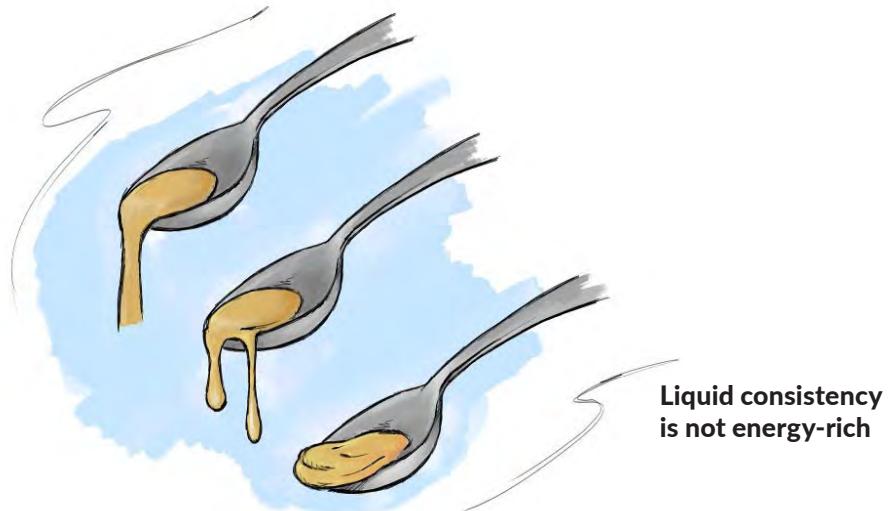
Counsel **ONLY** on the identified problem concluded from data recorded on the recording form.

Feeding problems 1

Feeding problem	Counsel
During illness, children often lose their appetite and eat less. Families may stop some food items	<ul style="list-style-type: none">Well fed children recover quickly from illness. Your child needs more energy and nutrients when sick. Her/his appetite will improve as s/he gets better.Responsive feeding helps your child eat better. Gentle encouragement and patience are needed.For breastfed children: breastfeed more often, and for a longer time.Offer small amounts of favourite foods frequently.Offer soft, well-cooked food; it is easier to eat.Add a teaspoon of oil, margarine or coconut cream to food to increase its energy content.After illness, provide extra breastfeeding and extra food to make up for weight loss.Healthy foods do not cause illness. Don't stop any type of food during illness. You will deprive your child of important nutrients.
Food variety is limited	<p>Every type of food is a source of important nutrients. Your family food should include a variety of types of food:</p> <ul style="list-style-type: none">Animal source foods provide essential iron, protein and zinc.Eggs provide vitamin A (important for eyes and brain).Beans, peas and seeds provide proteins, fats and zinc.Green and orange vegetables and fruits are important sources of vitamin A and C.
Stopped breastfeeding	Continue breastfeeding your child. It provides a third of the child's nutritional needs. If busy, you can express breast milk.
Not giving snacks, or snacks given too close to meals	The small stomachs of children fill up fast and children burn energy quickly. Snacks between meals provide necessary nutrients and hydration. Fresh fruit and vegetables are good choices. Snacks should be timed to manage your child's hunger and boost nutrition. Do not give snacks immediately before a main meal.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



Component 2. Counselling on nutrition

Feeding problems 2

Feeding problem	Counsel
Small amounts and few meals	Offer the child the number of meals and amount of food indicated for her/his age. To do otherwise risks malnutrition and the child becoming weak and falling sick.
Forcing the child to eat	Don't force your child to eat and don't shout at her/him. This may result in the child disliking meal times and eating less. Actively feed your child and make meals a time of affection to help your child eat better
Late introduction of complementary foods	At this age, breastfeeding provides only one third of your child's nutritional requirements. Without complementary foods growth and development will slow down and the risk of malnutrition and iron deficiency anaemia increase.
Not giving enough fluids	When the infant is exclusively breastfed, breast milk provides all water and fluids s/he needs. After they reach six months infants need to be given water or milk to supplement breastfeeding. Give only small amounts of water during mealtimes and the rest at the end.
Child consumes soda drinks, sweetened fruit juices, tea, coffee and junk food	Do not give drinks that have a high sugar content or high levels of acidity to your child. They lead to unhealthy weight gain, poor oral health, and dental cavities. Too much soda means missing the calcium kids need from milk to build strong bones and teeth. For good oral health, encourage children to drink water throughout the day. Do not give your child junk food like potato chips, chocolate, candies, etc. Eating junk food regularly leads to health problems such as obesity, anaemia, allergies and chronic illness in later life. They can also cause constipation and less energy.

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



Place finger and thumb each side of the areola and press inwards towards the chest wall

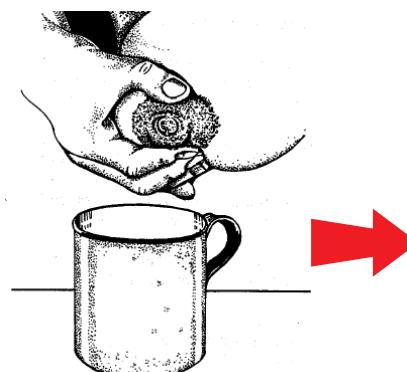


Press behind the nipple and areola between your finger and thumb

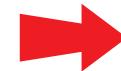


Press from the sides to empty all segments

Breast milk expression



Express breast milk in a clean glass or a glass jar. Cover the glass/jar



Store at room temperature for 4-6 hours or in a refrigerator for 24 hours



Warm breast milk in a warm water bath

Storage of expressed breast milk

Component 2. Counselling on nutrition

Feeding problems 3

Breastfeeding and working mothers

Breast milk provides one third of the nutrients needed by infants one year up to two years. You can continue breastfeeding your baby when you return to work by expressing breast milk into a glass or a glass jar.

- Wash the glass or jar with hot water and soap and rinse well.
- Wash your hands with water and soap.
- To facilitate the process, put warm compresses on your breasts for 3–5 minutes.
- You need to express as much milk as possible before you go to work so express milk from both breasts. It may take 20–30 minutes to obtain enough milk.
- Glasses/jars should be covered and stored according to the time of expression: milk expressed first should be given to the infant first.
- Glasses/jars can be kept at room temperature for 4–6 hours and in a refrigerator for 24 hours.
- To give the stored milk to your child put the glass/jar in a warm water bath. Do not shake the glass/jar or stir with a spoon, just move it gently. Do not let the warm water to come in.
- Feed expressed breast milk to the child with a cup or with a cup and spoon. Never use a feeding bottle.
- Throw away any remaining stored breast milk.

If mother wants to stop breastfeeding because of going to work or other reasons, advise on expression and storage of breast milk

In hot weather breast milk is best stored in a refrigerator

Caring for health and development of children aged one up to two years at home

Component 2. Counselling on nutrition



If meal is mostly liquid soup



Add milk powder, liquid milk, finely grounded roasted peanuts, margarine, ghee, oil to improve its quality



Component 2. Counselling on nutrition

Feeding problems 3

Feeding problem	Advice
Food too liquid	<p>Thin, liquid food is not energy-rich. Children will not grow stronger if they do not take enough nutrients, even if they consume the quantity indicated for their age. The food must be energy-rich.</p> <p>Thin soups and cereals fill the stomach but do not provide enough energy for a growing child. Food should not be overly liquid, but nor should it be too thick. It should be prepared so that it stays on a spoon.</p>
Prepared food is liquid and has too few ingredients	<p>To improve the quality of your child's food, add any of the following to the child's plate:</p> <ul style="list-style-type: none">• a spoonful of milk powder or liquid milk• finely ground roasted peanuts, especially if the meal is made up with vegetables only• a spoon of ghee or oil.

Caring for health and development of children aged one up to two years at home

Component 3. Counselling on caring for hygiene

Bathe the young child in a bath tub



Get everything ready in advance



Test water temperature



Lay child in the tub feet first



Begin washing the child



Wash genitals last

For girl: start at the front and gently wipe backwards.

For boy: gently rinse the genital area with water while bathing



Wash hair at the end



Make the bath time, a time of fun

Dry the child, put on a nappy and dress the child quickly



Component 3. Counselling on care for hygiene

Bathing

A baby tub is perfect for bathing infants, but when older, your young child is ready for an adult bathtub.

For transition to an adult tub:

- put the baby bath into the bath tub
- move the bath tub into bathroom for a while to familiarize your child with the environment before

Never leave your child unsupervised. Children can drown in a small amount of water.

- Have everything you need before you begin: towel, soap, washcloths, cotton balls for cleaning eyes and ears, towels, a clean nappy and clean clothes.
- Make sure the bathroom is warm. Fill the tub with a few inches of water.
- Test water before placing your child in it. It should be warm, not hot.
- Place your child on a non-slip mat. Wet bathtubs are slippery.
- Avoid bathing the child when s/he is hungry or straight after feeding to avoid spitting in the tub.
- If your child likes to bathe and it relaxes her/him, use bathing as a way to help settle her/him for sleep in the evening.
- Support your child throughout the bath with the non-dominating hand, and use the other hand to wash her/him.
- Keep the child warm by pouring warm water over her/his body throughout the bath.
- Use a soft washcloth to gently wash the face, body, arms and legs, and cotton balls to wipe eyes and ears.
- Clean genitals last. For girls, wet a cotton ball, hold legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water.
- Wash the hair by gently pouring water onto the hair and scalp. If you use baby shampoo, use your hand to protect the eyes from being irritated. Before rinsing, check that the water you will pour is not too hot.
- Towel your child dry, put on a clean nappy and dress quickly in clean clothes.

In hot weather breast milk is best stored in a refrigerator

Caring for health and development of children aged one up to two years at home

Component 3. Counselling on caring for hygiene

Change diaper regularly



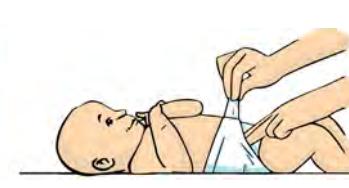
Wipe bottom with a damp cloth
For girls, clean genitals from
front to back
For boys, gently rinse with
water



Give baby some diaper time
to air the skin to prevent rash



Put on a new diaper



Fasten the diaper



Dress your infant



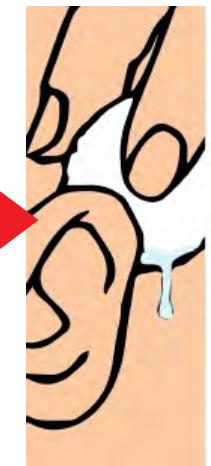
Wash your hands



Trim your infant's nails



Clean your baby's nose



Be careful not to stick anything inside baby's ear.
It can cause damage.

Component 3. Counselling on care for hygiene

- **Keep face, neck and hands always clean several times a day**

Start teaching children how to wash their hands. Children often put their hands in their mouth so they need to be kept free of germs.

- **Change diapers regularly and keep diaper area always clean**

For girls, wet a cotton ball, hold the legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water.

- **Trimming fingernails**

Always keep fingernails clean. Dirty nails carry germs which can enter child's body and cause disease when the child sucks her/his hands. Always keep your child's fingernails trimmed. With long and sharp nails, the child can scratch and hurt her/himself. The best time to trim nails is when your child is asleep. Use appropriate scissors to cut nails without hurting the child, by avoiding cutting nails too deep.

- **Cleaning ears**

Be very gentle. Use a cotton wool ball to wipe behind and around the ears. Never insert cotton earbuds into the ears. It may damage the eardrum.

- **Keep infant's nose unclogged**

Clean dried mucus in the nose gently, with a damp soft cotton cloth twisted to form a point.

Caring for health and development of children aged one up to two years at home

Component 3. Counselling on caring for hygiene



Wash your hands



With cotton wool ball and warm water, wipe gently from inside corner to the outside



Wash your baby's clothes and toys and hang them in the sun, it helps killing germs

Component 3. Counselling on care for hygiene

- **Clean eyes**

Clean eyes to prevent eye infection. Gently remove dried mucus with a soft damp cloth or soft cotton ball. Moisten a cotton wool ball with warm water and gently clean the eyelids, wiping from inner side to outer side of the eye. Use a different piece of cotton wool for each eye.

- **Keep toys clean**

Regularly wash toys with plain water, and wipe them using a clean tissue paper or cloth to avoid infection. At this age, infants will reach for things and put them into their mouth.

- **Keep clothes clean**

Remove dust and any substances that may irritate the child's delicate skin.

- **Sanitize the home**

Clean your house to limit exposure to harmful germs and microbes. Keep your home free of flies and mosquitoes to avoid diarrhoea and malaria. The child should sleep under a mosquito net. Do not sweep and dust close to your child. Dust has allergic properties and carries microorganisms. Ask family members not to smoke inside the house.

Caring for health and development of children aged one up to two years at home

Component 3. Counselling on caring for hygiene



Wash your hands before cleaning your child's mouth



Use a soft tooth brush to clean your child's teeth

Component 3. Counselling on care for hygiene

Mouth and tooth hygiene

At the age of your child, start using a soft baby toothbrush with water, but do not use toothpaste until your child reaches the age of three.

- Teach your child to brush her/his teeth. Regular and thorough brushing is essential for preventing tooth decay, gum disease, tooth loss, and bad breath. Good habits and proper techniques are essential: when it comes to teaching kids how to brush, try to make the task fun and not a chore.
- Stand behind your child and gently tilt their head back as you brush.
- Brush your child's teeth twice a day, after breakfast and before bed.
- Offer healthy snacks.
- The best drinks for children's teeth are water or milk.
- Do not give your child drinks that have natural or added sugar, such as sweetened fruit juice, soda and flavoured milks. They can cause tooth decay.
- Healthy children's teeth mean healthy adult teeth. It is important that you look after your child's first teeth.

Caring for health and development of children aged one up to two years at home

Component 4. Counselling on developmental milestones

At 12 months



Climbs stairs crawling



Stands and walks holding furniture



Points with index finger



Puts things in a container



Plays peek-a-boo and pat-a-cake



Component 4. Counselling on developmental milestones

At 12 months

- Can get into a sitting position without help
- Pulls up to stand, walks holding on to furniture
- Climbs stairs crawling
- Uses simple gestures, like shaking the head to say no, or waving good-bye
- Says “mama” and “dada” and exclamations like “uh-oh”
- Plays games such as peek-a-boo and pat-a-cake
- Copies gestures
- Pokes with index (pointer) finger
- Follows simple directions like pick up the toy

Vision

- Puts things in and takes them out of containers
- Points with index finger
- Copies gestures

Hearing

- Tries to say words that you say

Caring for health and development of children aged one up to two years at home
Component 4. Counselling on developmental milestones

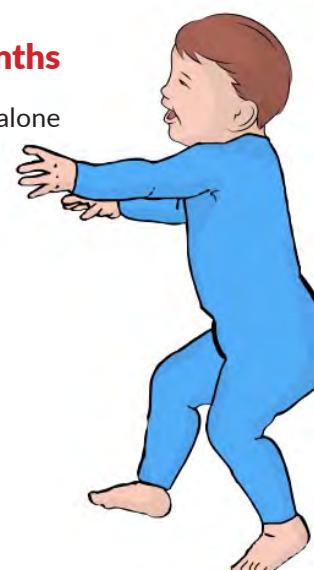
At 15 months

Stands alone



At 18 months

Walks alone



Eats with a spoon



Plays simple pretend



Component 4. Counselling on developmental milestones

At 15 months

- Can stand up alone

At 18 months

- Walks alone
- Pulls toys while walking
- Drinks from a cup
- Eats with a spoon
- Points to body parts
- Knows what some things are: telephone, brush, spoon, etc.
- Says several words
- Plays simple pretend games, such as feeding a doll
- Likes to hand things to others in play
- Points to indicate what s/he wants
- Knows what ordinary things are

Caring for health and development of children aged one up to two years at home

Component 4. Counselling on developmental milestones



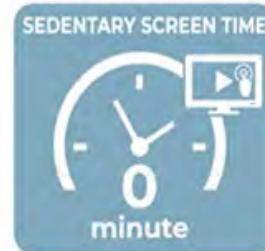
Engage your child in active games



Replace sedentary screen time with storytelling and looking at pictures



Don't restrain a baby's movement for more than one hour at a time



LET'S
Be active | World Health Organization



Children should have regular sleeping habits and a calm bedtime

Component 4. Counselling on developmental milestones

Effect of physical activity, good quality sleep and maximum reduction of sedentary life on growth and development

Physical activity

- Make physical activity routine in your child's daily life. This will contribute to her/his health and development.
- Your child should be physically active several times a day, spending at least 180 minutes a day on activities such as standing, walking holding your hand or walking alone, throwing a ball, dancing.
- You and your child's father should be role models by being physically active.

Reduce sedentary restraining time to a minimum

- Do not restrain your child's movement, in prams/strollers or high-chairs, strapped on your back or overwrapped, for more than one hour at a time, and do not encourage your child to sit still for extended periods. Sedentary time results in reduced communication with family members and can lead to language delays, reduced attention span and lower levels of school preparedness.
- Sedentary screen time (watching TV or videos and playing on computers) should be avoided.
- When sedentary, the child should be engaged: storytelling and looking at pictures in a book are recommended.
- You should be role models: replace screen time with physical activity, walking to shops, or taking the child to a park to play, and spend leisure time on outdoor activities.

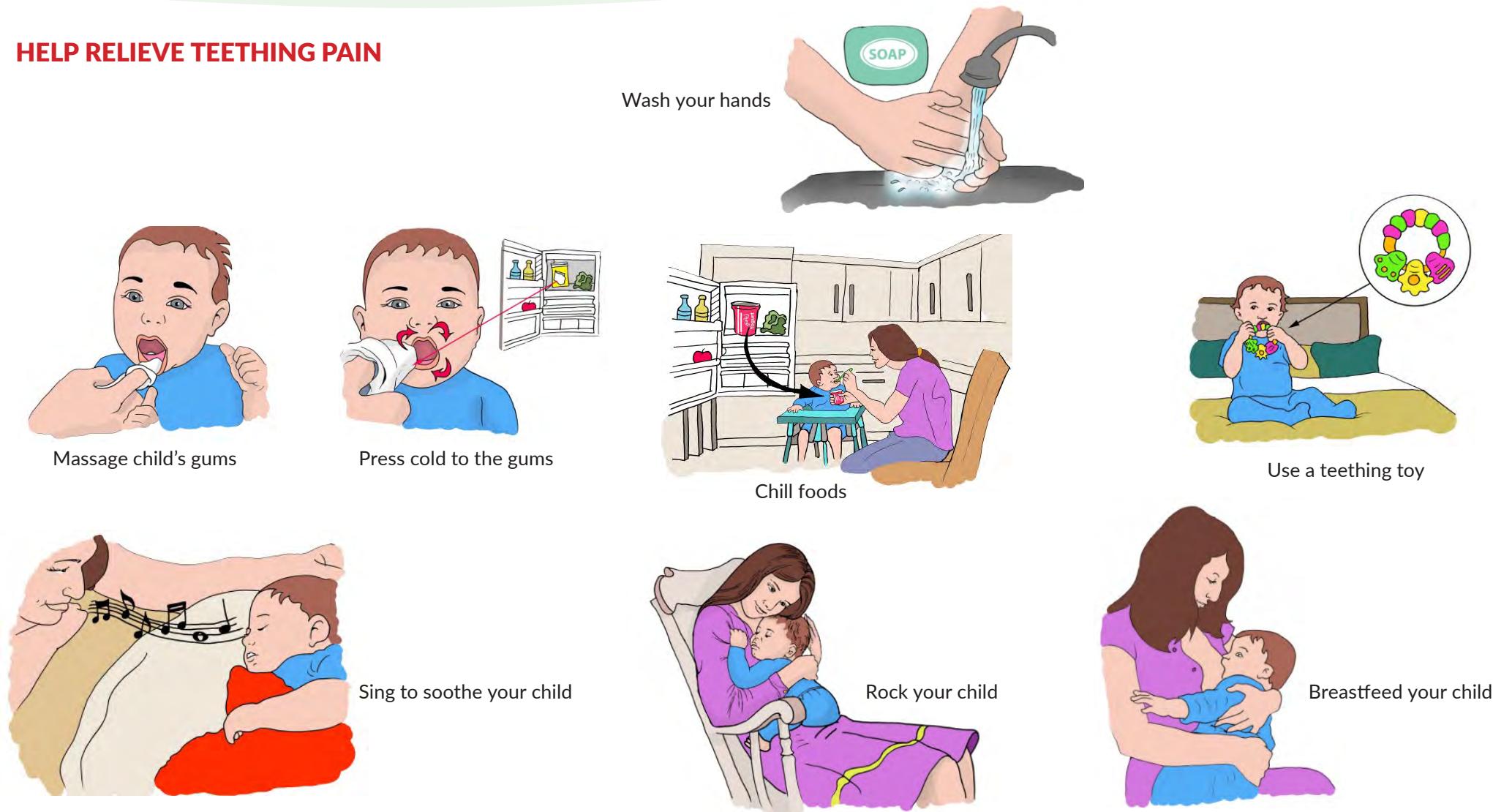
Good quality sleep

- Good quality sleep plays an essential role in growth and development. Children this age need 11-14 hours good quality sleep, inclusive of naps, with regular sleep and wake-up times.
- Good quality sleep provides the energy children need to be active. A well-rested child is an active child.
- Offer your child a regular sleeping time and calm environment in which to sleep.
- Keep electronic screens out of your child's bedrooms.

Caring for health and development of children aged one up to two years at home

Component 4. Counselling on developmental milestones

HELP RELIEVE TEETHING PAIN



Component 4. Counselling on developmental milestones

Teething

Teething is a normal part of development. At this age, children should have eight teeth.

Teething can cause pain and discomfort due to the swelling of gums 3–5 days before the tooth comes through. Pain can be stressful for your baby and s/he becomes fussier than usual especially at night: s/he may drool more, chew fingers or toys to help relieve the pain, rub gums together, pull on ears, rub chin and cheek, and lose appetite. These symptoms disappear as soon as the tooth breaks the skin.

Teething can also cause the infant's temperature to go up. Higher temperatures during teething are usually due to infection.

You can relieve teething pain by:

- Massaging the child's gums with your finger. Make sure to wash your hands first.
- Pressing a cold cloth to the gums. Before the tooth erupts, use a clean, cold wet cloth to press on the child's gums. This helps numb the pain and reduce swelling.
- Chill foods. Cold is a good remedy for teething pain. Give your child some cold food right before bed. Try yoghurt.
- Use a clean teething toy. Pressure on the gums can help your child when teething. Let your baby chew on a clean rubber teething ring or toy.
- Singing/rocking: one way to help get your child to sleep is to sing in a quiet, low key. Move around with your child and gently rock her/him to sleep.
- Breastfeeding is one of the best ways to give your child comfort and get her/him to sleep.

Caring for health and development of children aged one up to two years at home

Component 4. Counselling on developmental milestones



Motivate the child for toilet training



Pretend play will facilitate toilet training

Try to use elements of play
as pretend play will facilitate
toilet training



Component 4. Counselling on developmental milestones

Only for children 18 months or more who did not start toilet training

Toilet training

Start potty training when your child is physically and emotionally ready. This can be as early as 18 months.

Summer months are best for toilet training. In warmer weather children need to go to the toilet less often, and tend to wear fewer clothes, which simplifies the process. You should also teach your child some relevant words and phrases for going to the toilet – for example pee, poo and I need to go.

- When you change nappies put the soiled nappy in the potty to help your child understand what the potty is for.
- Put her/his favourite toy on the potty and praise the toy: your child may then imitate the toy.
- Identify things that can motivate your child like favourite food or toys.
- Walk your child to the potty at regular intervals throughout the day, including just before going to bed for the night (one complete potty mission).
- Do not offer liquids or snacks after dinner.
- Wake your child halfway through the night to see if s/he wants to pee.
- If your child does not wee or poo after 3–5 minutes of sitting on the potty take her/him off. It will feel like punishment to your child if you make her/him sit on the toilet for long periods of time.
- If initial training does not work do not be disappointed. Be patient, and try again.
- Make sure your child is eating plenty of fiber and drinking lots of water so s/he does not get constipated. Constipation makes toilet training harder.

Caring for health and development of children aged one up to two years at home

Component 5. Counselling on care for development



Give your child items to stack



Give your child items to put into a container



Play simple word games: Where is your nose? Where is the bird?

Play peek-a-boo and pat-a-cake

Component 5. Care for development (play and communicate with the child)

Age	Play activity	Communication activity
<p>1-2 years</p> <p>Other family members, not just the mother, should play with the child</p>	<p>Children at this age are active. They like to move around exploring things, and to play with household items.</p> <p>Give your child objects to stack, and to put into containers and take them out.</p> <p>When children learn a new game they tend to repeat it again and again, and are happy when you watch them.</p> <p>Encourage your child to play as s/he learns while playing.</p> <p>Encourage your child by watching. Name what s/he is doing – you are filling the box, you are lifting the spoon – and play with her/him.</p> <p>Give your child safe household items to play with. Ensure the items with which your child plays are safe.</p> <p>Sample toys: nesting and stacking object, container and clothes pins.</p>	<p>At this age, your child is learning to understand what others say, and is beginning to speak and to say some words like “water” and “ball”. Use every opportunity to converse with your child during feeding time and bathing.</p> <p>Try to understand what your child is saying. Ask your child simple questions, and respond to your child’s attempts to speak. Play simple word games, and ask simple questions: Where is your toe? Where is the bird?</p> <p>Look at pictures with your child and talk about what you can see</p> <p>Praise the child’s efforts, and soothe her/him when s/he is hurt.</p>

Caring for health and development of children aged one up to two years at home

Component 6. Counselling on prevention of accidents and injuries



Don't smoke at home as it causes suffocation



Smoke inside home may cause suffocation



**Remove bib
before sleeping**



Don't sleep in same bed with young child as this may cause suffocation. Let young child sleep in a separate bed.



Component 6. Counselling on prevention of accidents and injuries

Suffocation

Causes of suffocation

- The ribbons used to tie bibs around the infant's neck and attached to pacifiers can cause suffocation. Remove bibs before sleeping.
- Infants that sleep in the same bed as their parents are at a risk of suffocation. Parents can roll onto infants during sleep, and they can get tangled in sheets or blankets. Infants should sleep in a separate bed, without siblings or parents.
- Smoke inside the house irritates infants' lungs. If you must use charcoal or wood for cooking do it outside the house.

- **Tobacco smoke**
 - Causes lung irritation and may lead to suffocation. Tobacco smoking harms those who smoke and those who inhale the cigarette smoke passively.
 - The smell of tobacco smoke remains on clothes and bodies, and irritates the lungs. It is better for the health of the whole family not to smoke tobacco.
 - Keep infants away from smokers and places where people smoke.
 - Do not smoke inside your home or car, or anywhere near the baby, even when you are outside.
 - If you have been exposed to smoke, take a shower and change clothes before touching infants.
- **Pillows, stuffed toys and blankets**
 - If your infant sleeps face down a soft surface, s/he can suffocate.
 - Keep your infant's bed clear of stuffed toys and soft pillows.
 - Always place your infant on her/his side to sleep.

Caring for health and development of children aged one up to two years at home

Component 6. Counselling on prevention of accidents and injuries



Good positioning
avoids choking



Poor positioning
may lead to choking



The child at this age walks and can easily reach objects, don't put small objects in her/his reach to avoid choking



If your child is choking

- Sit down and lay the child face down along your thighs, supporting the head with your hand
- Give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades

Component 6. Counselling on prevention of accidents and injuries

Choking

Choking is a common cause of injury and death in young children. Their small airways are easily obstructed.

Causes of choking

- Poor attachment to the breast can cause choking. Observe breastfeeding to see positioning and attachment.
- Young infants crawl and can reach for objects and grab them, and can put them into their mouths and choke. Keep small objects away from your infant.

If an infant is choking, teach the mother or father to:

- sit down and lay infant's face down along their thighs, supporting the head with one hand;
- give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades.

Caring for health and development of children aged one up to two years at home

Component 6. Counselling on prevention of accidents and injuries



Child can climb stairs, place baby gate at the top and bottom of the stairs, never leave your child on a high surface or by an open window



Keep the ground clean and free of objects that may injure. Keep knives, etc. out of the reach of children

Regularly trim infant's nails to avoid scratches

Component 6. Counselling on prevention of accidents and injuries

Falls

- Never leave toys, or other objects on the ground, or leave the ground slippery. Your child and other family members could fall and experience trauma or a fracture. Always keep the house tidy, with everything in its place.
- Never leave your child unattended on high surfaces. They can easily fall.
- Never leave your child close to an open window. Keep your child away from windows and close them. Your child stands and walks, is curious and likes to explore things.
- Fix a wooden gate at the top of stairs to prevent falling. Your child climbs stairs and could fall.

Wounds

- Never leave pins attached to your child's clothes. If necessary, use safety pins.
- Trim your child's fingernails regularly. If they are long and sharp they can cause cuts and scratches.
- Don't leave sharp objects within reach of your child, they can cause serious cut wounds.

Caring for health and development of children aged one up to two years at home

Component 6. Counselling on prevention of accidents and injuries



Test water with elbow to avoid scalding



Don't leave the child unattended and keep any source of fire or boiling water out of reach



Don't put hot drinks or any harmful object at the edge of a table or cooker.



Don't carry or hold the child while you have a hot drink



Don't leave the child unattended next to a source of electricity

Component 6. Counselling on prevention of accidents and injuries

Burns

- Test the water with your elbow before bathing your child. Using hot water to bathe a child may scald them.
- Never carry your child while cooking, washing next to containers with boiling water, or while carrying hot drinks. You should keep your child in a safe place where s/he can be seen when you are doing the chores or drinking hot liquid.
- Avoid direct sunlight when it is hot. Children can get sunburn.
- Your child crawls and walks. S/he is curious and likes to explore things:
 - Don't leave your child unattended near an open fire, matches, source of electricity, or hot drinks within reach.
 - Never place hot or harmful objects at the edge of tables where your child can pull at the tablecloth.
 - Do not leave the kitchen door open and never place harmful objects, or pans with hot liquids, where a child can get at them.
- Children reach for and grab objects. Never leave sharp objects in your child's reach.

Caring for health and development of children aged one up to two years at home

Component 6. Counselling on prevention of accidents and injuries



Never leave your child unattended in the bathtub



Cover the toilet to avoid drowning



Place medicines, detergents and insecticides out of reach.



Component 6. Counselling on prevention of accidents and injuries

Drowning

- Never leave your child in the tub unattended. S/he can drown in any depth of water, even in few inches of water. This can happen in a very short time. Do not be distracted when you bathe your child. Prepare all that you need in advance. If you have to leave for any reason, wrap your child in a warm towel and take her/him with you.
- Your child may drown in the toilet. Don't leave your child unattended. Cover the toilet and close the door of the bathroom.

Intoxication

- Your child can stand up and walk. S/he is curious and likes to explore things. Never leave any medicines, detergents or insecticides within your child's reach.

Caring for health and development of children aged one up to two years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Continue breastfeeding the child and offer nutrient-rich and safe food



Seek care early, and ensure your child is immunized



Component 7. Counselling on prevention of maltreatment, neglect and violence

Maltreatment and neglect negatively impact on brain development during infancy and early childhood, and on the child's subsequent physical, cognitive, emotional and social growth.

Nutrition

- Continue to breastfeed your infant, and provide healthy and nutrient rich-food.

Health

- Immunizing the child to prevent illnesses denotes concern for the child's health.
- Early care-seeking: when a child does not feel well seek early care from a health facility, where there are qualified health care providers.
- Rational use of antibiotics: only give antibiotics that have been prescribed by a doctor.

Caring for health and development of children aged one up to two years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Play and communicate with your child, give her/him time and don't be distracted



Play and communicate with your child, take care for child's hygiene

Component 7. Counselling on prevention of maltreatment, neglect and violence

Nurturing

- Play and communicate to stimulate the psychosocial development of the child and strengthens the bond between child and family.
- Pay attention to your child and don't spend most of your time distracted.

Hygiene

if the child is clean with clean clothes and clean toys, it signals that mother is taking good care of her/him.

Caring for health and development of children aged one up to two years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Console your crying child



Belittling, beating or shouting at your child damages their physical, mental and cognitive development. Train on discipline and don't punish.



Violence and disputes between parents affect a child's mental health and happiness



Don't discriminate between male and female siblings



Component 7. Counselling on prevention of maltreatment, neglect and violence

Emotional development

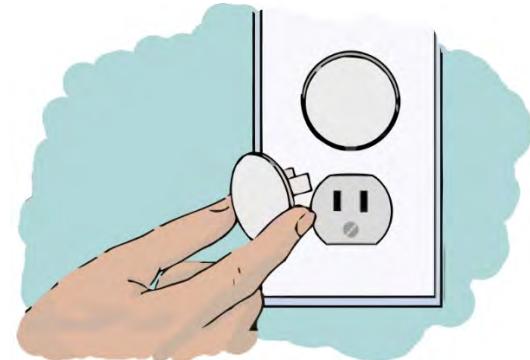
- Crying means your infant feels unsafe or is in pain. A responsive parent shows the infant that s/he is loved and cared for. This signals to the baby that s/he is safe and positively affects baby's emotional development.
- Do not discriminate between boys and girls or between siblings in playing and communicating, or in timely care-seeking. To do so negatively affects children's development.
- Blaming, belittling, shouting at or beating your child can damage physical, mental, moral and social health and development. It can undermine the relationship with parents who are supposed to be a source of safety and security.
- Train and teach discipline instead of punishing the child. This helps children develop judgement, self-control and reinforces positive social conduct.
- Violence and disputes between parents affect a child's mental health and happiness.

Caring for health and development of children aged one up to two years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Keep your child safe from harm (safe shelter and living conditions)



Component 7. Counselling on prevention of maltreatment, neglect and violence

Shelter and safe living conditions

- A home where your child is safe from harm, surrounded by a family giving her/him love, attention, and opportunities to learn, and where other siblings are well treated, will have a lasting positive effect on children's social, emotional and cognitive development.
- Bad relations between parents, distress children and the negative experience will last as they grow, affecting social, emotional and cognitive development.
- Never leave infants near open fires, sources of electricity, sharp objects, or toxic substances.
- Do not shout at or hit your child. Treat her/him nicely.

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. Care-seeking practices. When to seek care. Checking for the presence of danger signs



Unable to breastfeed



Convulsions



Vomits everything

Caring for health and development of children aged two years up to five years at home

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the child to a health facility.

Check for the presence of danger signs.

These are signs that indicate a possible critical condition. If any of these signs are present, the child needs to be urgently referred to a health facility.

First sign: unable to drink or breastfeed

Your child is too weak to be able to drink or to suckle and breastfeed.

Second sign: convulsions

Child's arms and legs become stiff. The child may stop breathing and become blue. There could be a recurring movement of one part of the body, such as twitching of the mouth or blinking of the eyes.

Third sign: vomits everything

If your child is not able to hold anything down at all, all that goes down, comes back up; this is a danger sign.

If your child vomits several times but holds down some fluids, this is not a danger sign.

Give information as listed in the recording form.

Get permission to check the child.

Remember to wash your hands before touching the child.

Check if any danger sign is present. If yes, counsel on urgent referral. If not present, teach the mother the danger signs.

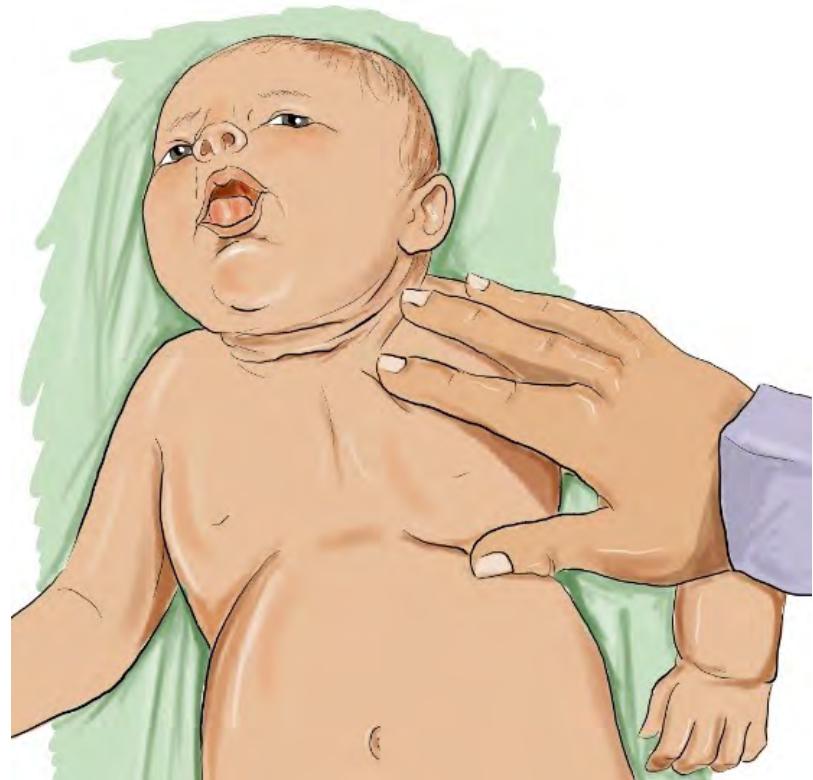
If the mother says the child is unable to drink or breastfeed, or if you are in doubt, check by asking the mother to breastfeed her child.

For convulsions, first ask the mother if the child has had convulsions, and check if infant is convulsing now.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. Care-seeking practices. When to seek care. Checking for the presence of danger signs



Difficult breathing



Use timer to count breaths

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the child to a health facility.

Check for the presence of danger signs.

Fourth sign: fast breathing

Children often breathe faster than older children and adults, and slower than newborns and infants.

If you notice your child is breathing more quickly than normal or that there is difficulty in breathing this is a danger sign that, could denote a serious health condition.

You need to take the child urgently to a health facility

Is the baby fast breathing?

Use a timer to count respiratory rate.

Counting respiratory rate

1. Wait for child to be calm or sleeping. Do not count when baby is breastfeeding or crying, otherwise the count will be incorrect.
2. Make sure there is enough light to see the breathing movements.
3. Gently lift the child's shirt so you can see breathing movements.
4. Watch a few breaths until you are sure when the child is breathing in and out.
5. Start the timer and count breaths for one full minute (until the long beep that marks the end of one minute).
6. If you counted 40 breaths or more, do not repeat the count. The child has fast breathing.

If a child is fast breathing, urgently refer to a health facility.

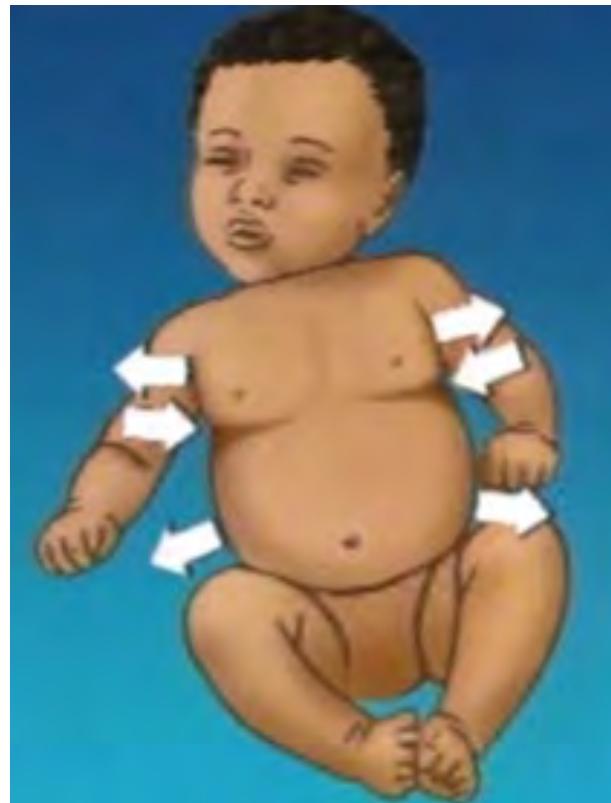
If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. Care-seeking practices. When to seek care. Checking for the presence of danger signs



Normal breathing: when child breathes in upper and lower chest walls and abdomen **go out**



Chest indrawing: when child breathes in upper chest wall and abdomen **go out** while lower chest wall **goes in**

Component 1. Counselling on family health care practices

Care-seeking practices

When to seek care and take the child to a health facility.

Check for the presence of danger signs.

Fifth sign: severe chest indrawing

If your child is breathing with difficulty and you find a very deep groove between the chest and abdomen.

This is a danger sign, and the baby has a serious condition and should be taken to a health facility urgently.

Teach the danger signs

Chest indrawing is the groove formed between the chest and abdomen because of the lower chest wall going in when the child breathes in, and the upper chest and abdomen moving out.

How to recognize chest indrawing:

1. Wait for the child to be calm (these movements during crying or breastfeeding are not chest indrawing).
2. The child should not be bent at the waist.
3. Ask the caregiver to raise the child's clothes above the chest.
4. Look at the lower chest wall when the child breathes in. It must be clearly visible and present with every breath.
5. If you are unsure of the presence of chest indrawing, then, decide it is not chest indrawing.

If any danger sign is present, skip all other tasks and assist with referral

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. 1. Care-seeking practices.

When to seek care

IF THE YOUNG INFANT HAS ANY DANGER SIGN, SKIP ALL OTHER TASKS AND ASSIST REFERRAL



b. From whom to seek care

Component 1. Counselling on family health care practices

Care-seeking practices

From whom to seek care

- Trained health care providers should be the only trusted source of medical care.
- Do not seek care from untrained sources: they can cause harm to your child instead of being of benefit.

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. Care-seeking practices.

From whom to seek care.



Help to arrange transportation



Ask mother if she has savings



Take your baby to a health facility in a timely way

Component 3. Counselling on family health care practices

I. Care-seeking practices

b. From whom to seek care

Use good communication skills to explain to families the importance of referral, to convince them and to solve problems.

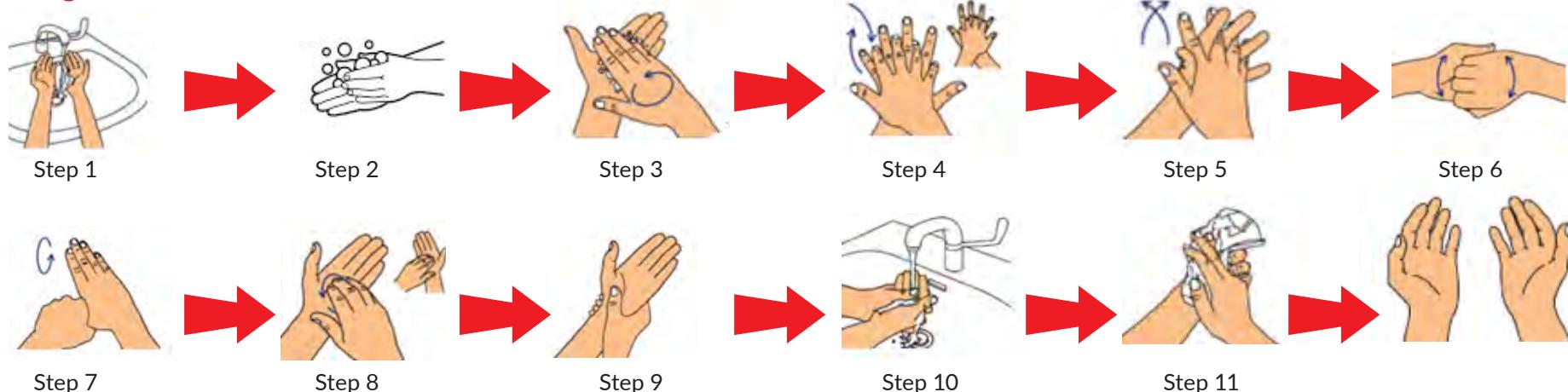
Counsel them only on the referral difficulty that you identify. Do not talk about difficulties that are irrelevant.

Difficulties	Advice
Fear that the health facility is a place where children often die	If your child is sick and you do not seek care quickly, the child may die Timely care from a health facility where there are doctors, supplies and equipment can help sick children get better Without treatment sick children can easily get worse and die
There is no one to care for the other children or do daily tasks	If your child does not get to a health facility it may risk her/his life. <ul style="list-style-type: none">• Would your husband stay with the other children in such a critical situation?• If not, ask who else (relatives or neighbours) can help with the children and daily tasks?• I can talk to your husband or help contact someone to help
Lack of transport	I will assist in finding means of transport
Lack of money	Do you have any savings? If not, I will help approach community committees or other members of the family
Family wants to take the child to a faith healer first	A child showing danger signs needs urgent treatment in a health facility. Delaying treatment may make the child's condition worse.
Mother is alone and she needs permission from husband or a family elder	I can help in contacting the person who can give permission to take the child to a health facility.

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. Prevention practices

1. Washing hands



REMEMBER TURN OFF THE TAP WITH A TOWEL, NOT WITH YOUR HAND.



When to wash hands



Component 1. Counselling on family health care practices

Prevention practices

Hand washing

Hand washing helps prevent the spread of infections. It can prevent major childhood illnesses like pneumonia and diarrhoea, the most common killers of children under five.

Handwashing with water and soap removes germs from hands.

When should you wash hands?

- After changing diapers or cleaning up a child who has used the toilet;
- Before touching the child;
- After using toilet;
- Before preparing food;
- Before eating;
- Before feeding a child;
- Before and after caring for someone who is sick;
- After blowing your nose, coughing, or sneezing;
- After touching an animal, animal feed, or animal waste;
- After touching garbage.

Remember to turn the tap off with a towel, not with your hands.

If houses don't have toilets with water supply and basin, advise and assist families to create a place within the home for hand-washing. This should have a wash basin, a container for water, and soap (or a local substitute).

How should you wash your hands?

1. Wet hands with water
2. Rub wet hands on soap, covering the hand with soap
3. Rub palms together
4. Rub back of each hand with the palm of the other hand keeping fingers interlaced
5. Rub palm to palm with the fingers interlaced
6. Rub back of the fingers with the fingers interlocked
7. Reach each thumb clasped in opposite hand using a rotational movement
8. Rub the tips of the fingers in the opposite palm using a circular movement
9. Rub each wrist with the opposite hand
10. Rinse the hands with water
11. Dry thoroughly with a clean towel

Caring for health and development of children aged two up to five years at home

Component 1. Counselling on family health care practices. Prevention practices



Use an insecticide-treated bednet to prevent malaria in high-risk areas



Antibiotics are only prescribed by trained health professionals



Don't take another person's antibiotics (neighbour, cousin, etc.)



Don't purchase antibiotics from a pharmacy without a doctor's prescription



Don't give your child an old antibiotic present at home

Component 1. Counselling on family health care practices

Prevention practices

Use of insecticide-treated bednet for prevention of malaria in high-risk areas

Malaria is a serious illness carried by mosquitoes. It is a major cause of death in children under five. Mosquitoes bite at night. You and your child should sleep under an insecticide-treated bednet to prevent the serious effects of malaria.

Rational use of antibiotics

- Antibiotics kill microbes that cause disease and can save the lives of sick children.
- Different diseases require specific types of antibiotic which should only be prescribed by a trained health professional.
- If antibiotics are given to a child who does not need them they can cause harm:
 - The microbe will get used to and resist the antibiotic. The child will then need much stronger antibiotics which may affect the baby's health.
 - Unnecessary use of antibiotics can impair your child's development.
- Do not purchase antibiotics from the pharmacy without a doctor's prescription.
- Do not take old antibiotics found at home or given by a neighbour: the child may not be in need of an antibiotic, s/he may not need this type of antibiotic, or the antibiotic could be old (expired).

Caring for health and development of children aged two up to five years at home
Component 1. Counselling on family health care practices. Prevention practices



Boil water, cleaning spoons and utensils

Component 1. Counselling on family health care practices

2. Prevention practices

Boiling water

Boiling the water kills microorganisms such as bacteria, viruses, or protozoans that can cause disease.

Boiling makes the tap water microbiologically safe.

Boiling water, cleaning plates, glasses, spoons and cooking utensils is crucial for child's health.

Bring water to a full rolling boil, let it boil for one minute, and let water cool before using it.

If there is no safe water in the area advise on boiling water to kill organisms and let water and bottles cool before using them and to clean thoroughly cups and spoons used to feed the child.

Caring for health and development of children aged two up to five years at home
Component 2. Counselling on nutrition



Help your child to feed her/himself under your supervision

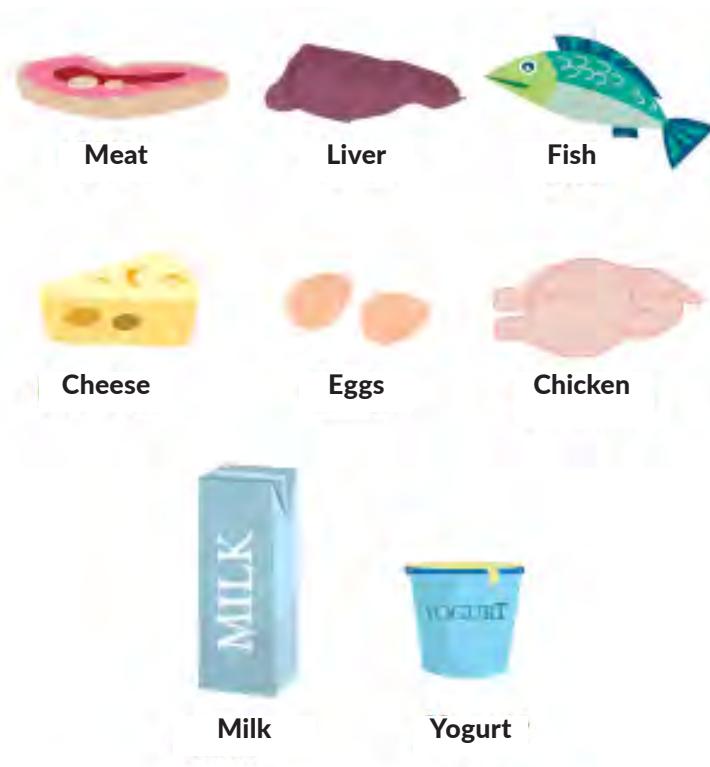
Component 2. Counselling on child's nutrition

- Your child at this age should eat a greater variety and amount of family food.
- Your child will depend totally on the food to get all her/his nutrient required to grow and become healthy. At this age the child will not breastfeed.
- If the food is not of a wide variety and is an insufficient amount, children can lose weight and become malnourished.

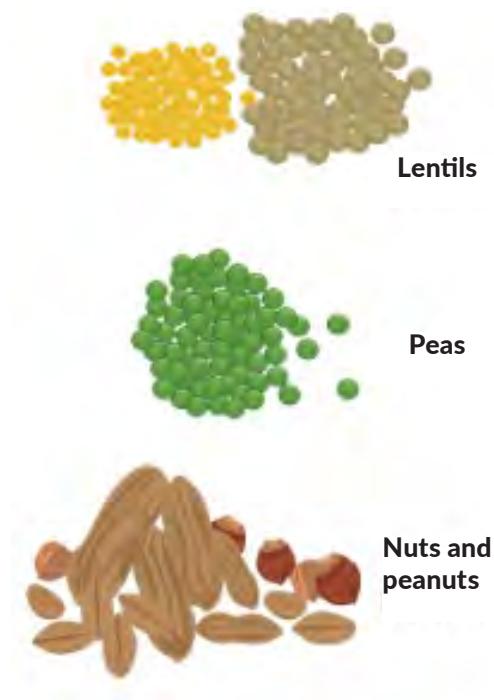
Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition

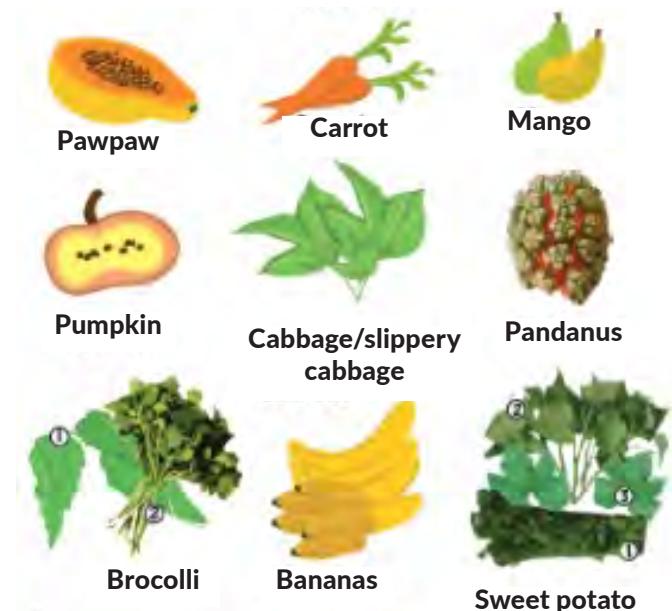
Animal-source foods are especially good for children, to help them grow strong and lively



Peas, beans, lentils, nuts and seeds are also good for children



Dark-green leaves and yellow-coloured fruits and vegetables help a child to have healthy eyes and fewer infections



Offer your child nutrient-rich food

Component 2. Counselling on child's nutrition

Your child is no longer being breastfed and without sufficient amounts of food s/he will lose weight and become malnourished. Your child's diet should be nutrient-rich. It should include a variety of complementary foods. Each is the source of important nutrients.

Group 1. Animal source foods

These help your child grow strong and active.

- They are rich in many nutrients, including proteins and iron, and are the best source of zinc, which helps to prevent illness.
- Animal meat and fish, and organs such as liver, are a source of iron which strengthens the blood.

Children need protein and iron to:

- make new blood
- help growth and development
- help the body fight infections and sickness.

- Eggs are rich in vitamin A, and yoghurt and other milk products are a good source of vitamin D.

Your child's diet should be nutrient-rich.

Group 2. Peas, beans, lentils and nuts

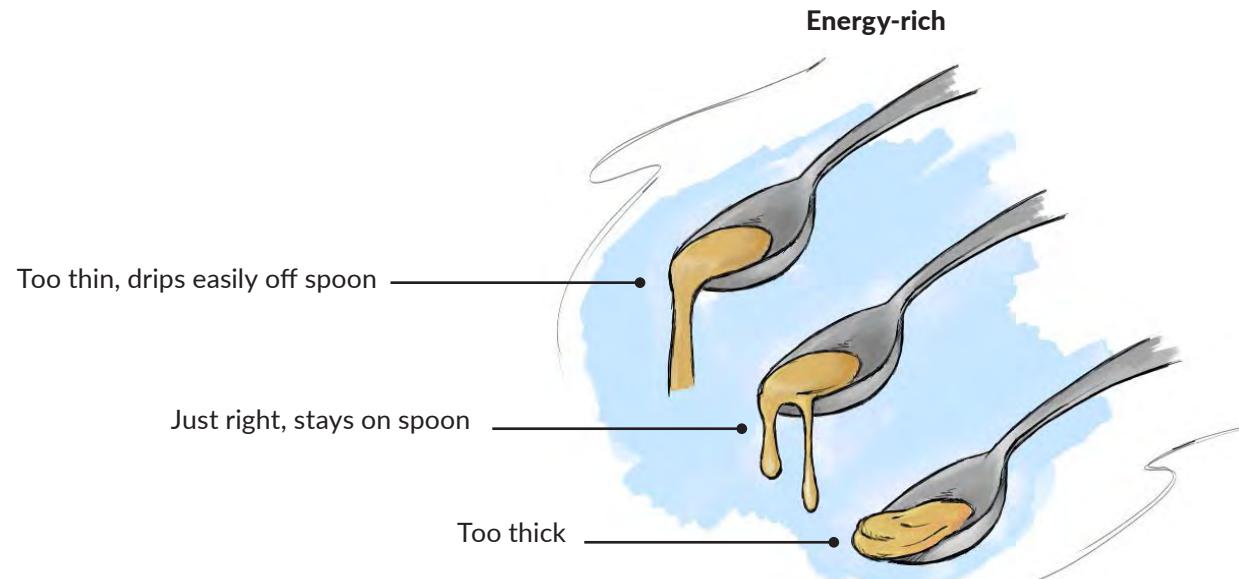
A good source of protein and iron. Lentils and beans can be used to replace meat and fish when they are unavailable. Nuts and seeds are good sources of protein and fats.

Group 3. Dark leafy green vegetables, fruits and legumes

They contain iron, though in smaller amounts than animal foods, and are a source of zinc. Dark leafy green and orange/yellow vegetables and fruits such as banana, mango, mandarin and oranges contribute vitamin A and vitamin C to the diet.

Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition



Offer safe and hygienically prepared food

Component 2. Counselling on child's nutrition

Good family food should be energy-rich

Your child needs to eat thick foods, finely chopped or mashed if necessary. They provide the energy required for your child more than thin or liquid food. Prepare food so it stays on the spoon. Thin soups and cereals fill the stomach but do not provide enough energy for a growing child.

Your child's food should be safe and hygienically prepared

- wash your hands before preparing food
- wash your child's hands to allow finger food (child to pick food while you feed her/him)
- wash vegetables and fruits before cooking or offering them
- wash cooking utensils
- food should be freshly prepared
- food should be well cooked
- food should be mashed with a fork and not in a mixer
- avoid salt, spices, sugar or preservatives
- cover food to keep away flies

To ensure adherence to your advice and that the infant takes all nutrients needed, you should know which foods are locally available to advise the mother

Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition

OFFER

A mixture of foods at meal times



Don't force your child



Don't add a lot of sugar or salt or pepper to the food



Don't give soda drinks, sugared fruit juices and junk food

Component 2. Counselling on child's nutrition

Offering food to your child

- Give your child family food as prepared to be consumed by the family.
- As the child will not be breastfed, s/he will depend on only food to get the nutrients requirements. Give a variety of foods. Include animal source food, green and yellow/orange vegetables and fruits in addition to staples such as rice, bread, beans, and potatoes.
- Ensure food is nutritious and provides enough energy (thick enough), and that the quantity is sufficient for the child.
- Encourage – but do not force – the child to eat more.
- Avoid excessive amounts of salt and sugar, and do not add preservatives to children's food.
- Avoid soda drinks and sweetened fruit juices.
- Children are fond of junk food, but it should be avoided. Junk food:
 - Is energy dense and has a high sugar/fat/salt content and low nutrient value in terms of proteins, fibers, vitamins and minerals
 - is responsible for obesity, hypertension (high salt content), heart disease and diabetes
 - affects how children perform in school and extra-curricular activities
 - does not provide the nutrients children need for well-being and mental health.
- Do not use a feeding bottle. Use a plate and a spoon.
- Offer 3–4 meals a day, according to your child's appetite. Each meal should comprise the equivalent of one cup of food.
- Offer 1–2 snacks. Snacks between meals provide some of the nutrients and hydration children need. Time well: do not give snacks immediately before a main meal.
- Pieces of fruit, oatmeal, yoghurt, nuts and cheese make good snacks. Fruit supplies fiber which prevents constipation, and helps the child develop chewing skills.
- Encourage children to eat whole fruits and vegetables and drink water or milk rather than juice. If juice is given to children, limit it to half a cup and ensure it is unsweetened.

Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition

Age	Food	How much per meal	How often daily	Snacks	Consistency
2-5 years	 <p>Family food with wide variety of nutrients</p>	 <p>1 cup</p>	<p>3-4 times depending on the appetite</p> 	<p>1-2 snacks</p> 	<p>Family food as prepared. Should be thick and not liquid</p>

Component 2. Counselling on child's nutrition

Varieties and amounts of food

- Offer the child family food, as prepared.
- Ensure that family food has a wide variety of nutrients, it has to be thick to provide enough energy.
- The amount of food should be equivalent to 1 cup in each meal.
- Child is to be given 3-4 meals according to the child's appetite.
- Make sure that family food includes animal-source food, and green vegetables.
- Offer 1-2 snacks: Snacks are important to your child as her/his stomach fills up fast and her/his body burns energy quickly. Between meals, snacks give her/his body the nutrients and hydration it needs. Time the snack well and don't give it a short time before the main meal, otherwise your child will not be hungry.
- You can give a piece of fruit to the child; fruits make a good snack.
- Offering a piece of fruit, is better than offering fruit juice. The whole fruit supplies fibre that prevents constipation and helps skills such as chewing, in addition to their nutritional value.
- The fruits contain natural sugar but this sugar becomes concentrated when made into juice.
- Encourage children to eat whole fruit or vegetable and drink plain tap water or milk rather than juice. If juice is given to children, limit it to only $\frac{1}{2}$ cup with no added sugar. You can also give for snacks: oatmeal, yoghurt, fruit, nuts, cheese, pudding.

In order to be able to counsel the mother on the amount of food to be given in each meal, gather items that you will need to demonstrate the quantity of food the infant needs (common bowls, etc.)

Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition



Play to encourage your child to eat



Feeding times should be periods of happiness and learning



Feeding times should be periods of love and affection. Use feeding times to communicate with your child.



A young child needs to learn to eat with lots of patience and encouragement

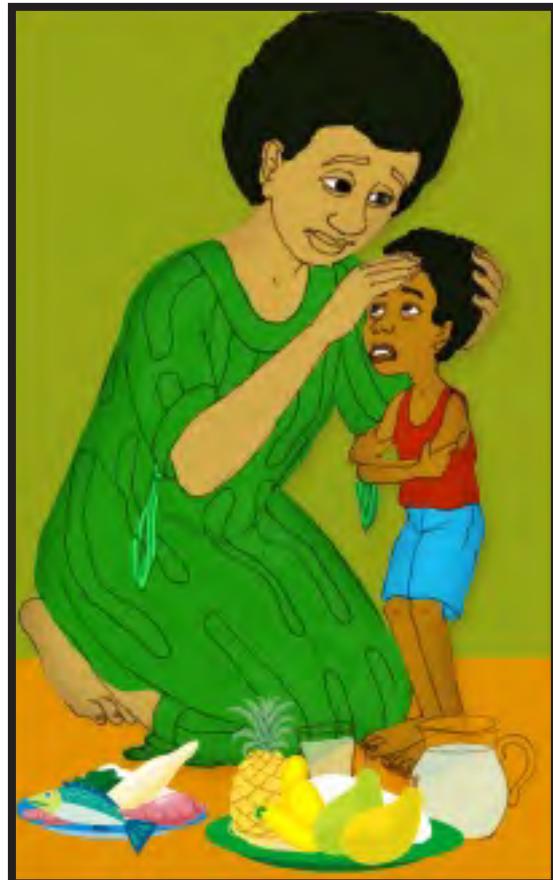
Component 2. Counselling on child's nutrition

Active/responsive feeding

- Offer your child adequate serving of nutritious food, in the amounts recommended for her/his age.
- Gently encourage your child to feed without forcing her/him.
- Wash your hands and your child's hands before feeding her/him.
- Supervise and help your child while feeding her/himself, to make s/he has eaten all her/his serving.
- Serve the child her/his own serving to know how much s/he has eaten.
- Make feeding times, periods of love, learning and affection. Encourage your child to feed by playing as well like "open wide for the plane to come inside". S/he will eat better if feeding times are happy.
- Don't threaten or show anger at your child if s/he refuses to eat. This will result in child eating less, and hating feeding times.
- If your child refuses some foods, try with different food combinations, tastes, textures and methods of encouragements. You can taste food first and show that you like it to encourage your child to imitate you, or you may pretend that you will eat what is in the spoon, and then direct it to the child's mouth.
- Have regular meal times where the child can focus without distraction.
- Respond positively to your child, with a smile, eye contact, play and encouraging words.

Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition



Gentle encouragement and patience is needed to feed a sick child



Offer the child a wide variety of foods to obtain the different nutrients s/he needs

Component 2. Counselling on child's nutrition

Counsel **ONLY** on the identified problem concluded from data recorded on the recording form.

Feeding problems 1

Feeding problem	Counsel
During illness, children may lose appetite and eat less	<ul style="list-style-type: none">• During illness, sick child requires patience and to be fed responsively.• Well fed children recover quickly from illness.• During illness, the child needs more energy and nutrients to fight infection, assist recovery and support catch-up growth.• Gentle encouragement and patience are needed.• Offer the sick child her/his favourite food, more frequently and in smaller amounts.• Add to food a teaspoon of oil, margarine, coconut cream to increase energy content.• Appetite will improve as the child gets better.• After illness, provide extra meal; good feeding helps make up the weight loss, to recover quicker and helps prevent malnutrition
Food variety is limited; some families may stop offering some nutrients during illness	<p>Prepare family food that contains different types of foods to ensure the child gets all nutrients needs:</p> <ul style="list-style-type: none">• Animal source food will provide iron (makes blood strong), protein (to develop healthier and stronger) and zinc (prevents illness).• Eggs will provide vitamin D (important for eyes and brain)• Beans, peas and seeds offer also proteins, fats and zinc• Green and orange vegetable and fruits are important sources of vitamin A and C.
Giving junk food	Don't give your child junk food; Regular junk food intake leads to long-term health problems such as obesity, accompanying emotional and self-esteem problems, anaemia, allergy and chronic illnesses in later life. It also leads to constipation, less energy and poor school performance in the future.

Caring for health and development of children aged two up to five years at home

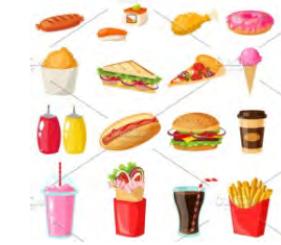
Component 2. Counselling on nutrition



Liquid consistency is not energy-rich



Don't force child to eat and don't shout at her/him



Don't give soda drinks, sugared fruit juices and junk food



Physical activity is essential to children at all ages



Water and milk are healthy drinks

Component 2. Counselling on nutrition

Feeding problems 2

Feeding problem	Counsel
Small amounts of food and few meals	Offer your child the amount of food and number of meals indicated for her/his age, otherwise s/he will develop malnutrition, become weak and fall sick often.
Consistency of food too liquid	Provide to your child food with suitable thickness. Improve quality of food if liquid soup is what is available at home, otherwise the child will not get energy requirements and will not grow strong.
Forcing child to eat	Don't force child to eat or shout at her/him; this may result in child eating less, and hating feeding times. Make feeding times periods of love and affection by responsive feeding; this will help infant eat better.
Not giving enough fluids	Water and milk are the best and healthiest fluids for your child. You can also offer small amounts of fruit juices but not frequent.
Giving soda drinks, sugared fruit juices, tea and coffee	Don't give your child soda drinks, sugared fluids, coffee and tea, they are high sugar content drinks: Intake of sweet drinks reduces the quality of your child's diet; leads to weight gain and poor oral health, and dental cavities. Too much soda means missing the calcium kids need from milk to build strong bones and teeth. For good oral health encourage children to drink plain water throughout the day.
Lack of physical activity for children	Teach and encourage your child do some physical activity; lack of physical activity is harmful to physical and mental well-being and may also exclude a child from critical social development.

Caring for health and development of children aged two up to five years at home

Component 2. Counselling on nutrition



If meal is mostly liquid soup



Add milk powder, liquid milk, finely grounded roasted peanuts, margarine, ghee, oil to improve its quality



Component 2. Counselling on child's nutrition

Feeding problems 3

- **Liquid consistency food**

The consistency for food of your child is very important. Liquid food will not be energy-rich and your child will not grow stronger if s/he does not get enough energy, even if the quantity is indicated for age.

Prepare family food with enough thick consistency. Thin soups and cereals fill the stomach but do not provide enough energy for a growing child. Food should not be liquid (spills off the spoon), nor very thick.

- **Adding additional ingredients to enrich food**

To improve the liquid soup, add any of the following to the child plate's:

- a spoonful of milk powder, or add liquid milk to the soup;
- beans or vegetables
- finely ground roasted peanuts finely, especially if the meal is made up with
- vegetables only;
- a spoon of margarine, coconut cream, ghee or oil.

Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene



Get everything ready in advance



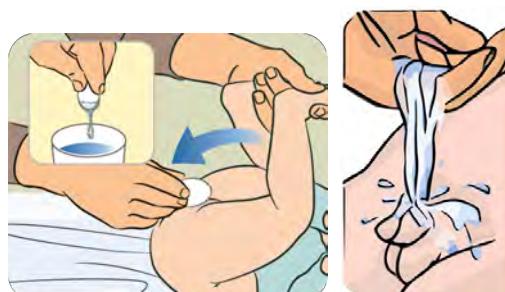
Test water temperature by dipping in an elbow



Lay child in the tub feet first



Wash the child



Wash genitals last

For girl: start at the front and gently wipe backwards.

For boy: gently rinse the genital area with water while bathing



Wash hair at the end



Dry the child, put on a nappy, if the child uses one

Dress the child quickly



Component 3. Counselling on caring for hygiene

Bathing

- At this age your child can be bathed in an adult bathtub.
- Never leave your child unsupervised. Children can drown in a few inches of water.
- Have everything you need before you begin: towel, soap, washcloths, cotton balls for cleaning eyes and ears, towels, and clean clothes.
- Make sure the bathroom is warm. Fill the tub with few inches of water.
- Test water before placing your child in it. It should be warm, but not hot.
- Place your child on a non-slip mat. Wet bathtubs are slippery.
- Avoid bathing the child when s/he is hungry or straight after feeding, to avoid spitting in the tub.
- If your child likes to bathe and it relaxes her/him, use bathing as a way to help settle her/him for sleep in the evening.
- Support your child throughout the bath with the non-dominating hand, and use the other hand to wash her/him.
- Keep the child warm by pouring warm water over her/his body throughout the bath.
- Use a soft washcloth to gently wash the face, body, arms and legs, and cotton balls to wipe eyes and ears.
- Clean genitals last. For girls, wet a cotton ball, hold legs apart and wipe between the labia with the cotton ball. Start at the front and gently wipe backwards. For boys, gently rinse the genital area with water.
- Wash the hair by gently pouring water onto the hair and scalp. If you use baby shampoo, use your hand to protect the eyes from being irritated. Before rinsing, check that the water you will pour is not too hot.
- Towel your child dry, put on a clean nappy if your child still uses them, and dress quickly in clean clothes.
- Make the bath time fun. You can put some toys in the tub.
- If you need to leave for any reason, wrap your child in a warm towel and take her/him with you.

Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene



Wipe bottom with a damp cloth
For girls, clean genitals from
front to back
For boys, gently rinse with
water



Give baby some diaper-free
time to air the skin to prevent
rash



Put on a new diaper



Fasten the diaper



Dress your infant



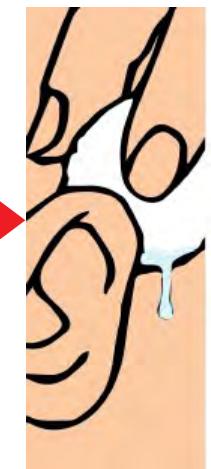
Wash your hands



Trim your infant's nails



Clean your baby's nose



Be careful not to stick anything inside baby's ear.
It can cause damage.

Component 3. Counselling on caring for hygiene

- **Clean your child's face, neck and hands** frequently throughout the day. **Children often put their hands in their mouth. Hands need to be kept free of germs.**
- **Change diapers** regularly, if your child still uses them, and always keep the diaper area clean. Use warm wipes to clean the child and change the diaper if the child is asleep. Using cold wipes may awaken her/him.
- Regularly change the underwear of children who do not use diapers.
- **Trim fingernails:** children's nails gather dirt as they play outside and can carry microbes. Discourage children from biting their fingernails, and always keep their nails clean. If children's fingernails are long and sharp they can scratch themselves. The ideal time to trim nails is when your child is asleep. Do not cut the nails too deeply as it can hurt your child.
- **Clean ears** gently with a cotton wool ball. Wipe behind and around your child's ears. Never insert earbuds into the ears. It can damage the eardrum.
- Clean dried mucus from your **child's nose** with a damp soft cotton cloth.

Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene



Wash your hands



With cotton wool ball and warm water, wipe gently from inside corner to the outside



Wash your baby's clothes and toys and hang them in the sun, it helps killing germs

Component 3. Counselling on caring for hygiene

- **Clean eyes** to prevent eye infection. Gently remove dried mucus with a soft damp cloth or soft cotton ball. Moisten a cotton wool ball with warm water and gently clean the eyelids, wiping from inner to outer eye. Use a different piece of cotton wool for each eye.
- **Regularly wash toys** with plain water, and wipe them using a clean tissue or cloth to avoid infection. At this age, children will reach for things and put them into their mouths.
- **Keep clothes clean:** remove dust and any substances that may irritate the infant's delicate skin.
- **Clean your house** to limit exposure to harmful germs and microbes. Keep your home free of flies and mosquitoes to avoid diarrhoea and malaria. The baby should sleep under a mosquito net. Do not sweep and dust close to your baby. Dust has allergic properties and carries microorganisms. Ask family members not to smoke inside the house.

Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene



Wash your hands before
cleaning your child's mouth



Use a soft tooth brush to clean your child's teeth

Component 3. Counselling on caring for hygiene

Care for mouth and tooth hygiene: dental hygiene is an important part of personal hygiene

- It is essential to care for your child's teeth from the moment the first tooth erupts. Healthy child's teeth usually mean healthy adult teeth too.
- Good dental care includes cleaning and checking your child's teeth and mouth every day. Lift the lip to look for white or brown spots. They may be early signs of tooth decay.
- Once your child is two years old, clean her/his teeth twice a day with a soft toothbrush and water.
- When your child is three, brush her/his teeth using a pea-sized amount of fluoride toothpaste on a soft toothbrush.
- Continue helping your children brush their teeth until they are 7–8 years old.
- Stand behind your child and gently tilt the head back as you brush.
- Brush your child's teeth after breakfast and before bed.
- Choose healthy snacks,
- Water and milk are the best drinks for children's teeth
- Do not give your child drinks that have natural or added sugar, such as sweetened fruit juices, soda, flavoured milks and chocolate drinks. They can cause tooth decay.

Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene



Wash child's feet and trim child's toe nails

Component 3. Counselling on caring for hygiene

Foot hygiene

If your child wears shoes all day, especially without socks, bacteria will react with the sweat on your child's feet and cause them to become smelly. A lot of dirt and bacteria can accumulate on your child's feet.

- Wash your child's feet every time they take a bath.
- Keep the feet clean by scrubbing them properly with soap and rinsing off with water.
- Always clean between the toes, the undersides of her/his feet, and under the toenails to keep microbes away.
- Always trim the toenails and keep them clean.
- Encourage your child to wear socks.

Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene



Teach your child how and when to wash hands



Teach your child to cover her/
his nose and mouth with a tissue
when sneezing or coughing



Teach your child to throw
garbage in a covered bin

Component 3. Counselling on caring for hygiene

Teach good hygiene habits

Promoting good hygiene is necessary to protect your child from germs and disease. Teaching personal hygiene requires patience. Avoid scolding your child if s/he makes a mistake.

To teach your child about hygiene

- **Explain the difference** between good and bad habits, and the reason why something is good or bad.
- **Praise** your child when s/he does something good. It can be as simple as washing her/his hands.
- **Start with the basics:** have your child wash their hands first and then move on to other things.
- **Set an example:** children learn by watching you so show your child the right way to do things.
- **Educate your child** by explaining the things that may happen when germs enter the body.
- **Make learning fun:** include games in the cleaning routine.

Teach your child

- How and when to wash hands with soap and water. Help your child to wash his/her hands every time they pet an animal, play outside, cough or sneeze, and before and after eating.
- To cover her/his nose and mouth with a tissue when sneezing or coughing. Germs can travel far on a sneeze or cough. If children use their hands rather than a tissue the germs will be present on their hands.

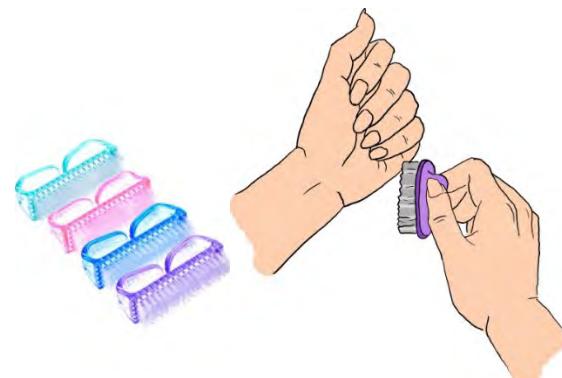
Caring for health and development of children aged two up to five years at home

Component 3. Counselling on caring for hygiene

Teach your child to brush her/ his teeth



Encourage your child to get excited about bathing



Teach your child to scrub nails



Teach your child to wear clean clothes



Teach your child to clean her/his toys and room

Component 3. Counselling on caring for hygiene

Teach good hygiene habits

Brushing teeth

- Help children to brush their teeth until they are seven or eight. Mother and father can brush their teeth alongside their child and ask the child to do as they do.

Showering and bathing

- Get your child excited about bathing.
- Put your child in charge of getting the bath ready so they look forward to the bath. Let her/him choose which toys to put in the tub.
- Give children a washcloth or sponge and ask them to wash themselves. It is a good way to distract them while you wash them too.
- Consider giving your child a waterproof doll that they can wash while you wash her/him. It is a fun way to help your child understand the purpose of a bath is to get clean.

Nail hygiene

- Teach your child to scrub and wash under his/her nails thoroughly to ensure they are clean at all times.

Inculcate habits of cleanliness

- a. Teach your child to wear clean clothes every day. If your child likes a particular dress, teach him/her to wear it only when it is clean.
- b. Teach them to pick up their dish after eating and put it in the sink and also wash their hands after.
- c. If your child spills something in the house, teach them to clean it. If they're too young to do so, help them clean. Teach the child to pick up toys and arrange them.
- d. Teach your child how to wash toys to keep them clean.
- e. Teach your child to keep his/her footwear clean to avoid contracting germs.

Caring for health and development of children aged two up to five years at home

Component 4. Counselling on developmental milestones

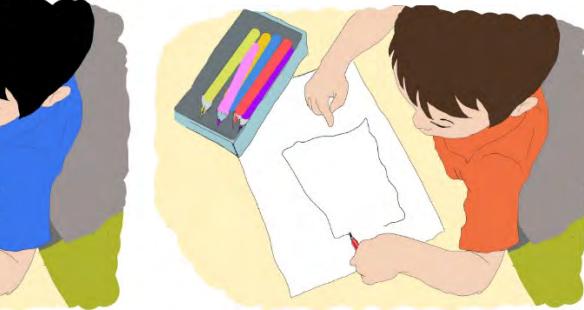
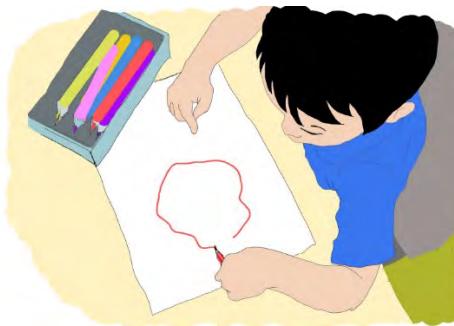
2 years old



Points to things in a book



Points to things or pictures when they are named



Copies circles or lines



Kicks a ball



Climbs up and down stairs holding on to the banister



Climbs on and off furniture without help



Can identify pictures in a picture book

Component 5. Counselling on developmental milestones

Child development reflects the healthy development of the brain and other systems of the body.

Development milestones refer to how your child plays, learns, speaks, acts, and moves. They offer important clues to your child's development.

At 2 up to 3 years

- Copies others, especially adults and older children
- Points to things in books
- Points at things or pictures when named
- Can go up and down stairs holding on to the banister
- Can climb on and off furniture without help
- Makes or copies lines and circles

Vision

- Points to things
- Draws lines or circles

Hearing

- Names items or things in picture books

Caring for health and development of children aged two up to five years at home

Component 4. Counselling on developmental milestones

3 years old



Goes upstairs and downstairs



Pedals a tricycle



Dresses and undresses self



Runs



Shows affection to others



Does puzzle with 3-4 pieces



Builds a tower with six blocks or more



Screws and unscrews jar lid

Component 5. Counselling on developmental milestones

Child development reflects brain and other bodies' systems development.

Development milestones refer to how your child plays, learns, speaks, acts and moves. They offer important clues to your child's development.

At 3 up to 4 years

- Runs
- Jumps
- Pedals a tricycle
- Goes upstairs and downstairs with one foot on each step
- Shows affection to others
- Dresses and undresses her/himself
- Carries on a conversation using 2–3 sentences
- Builds towers with six or more blocks
- Screws and unscrews jar lids and turns door handles
- Plays pretend games with dolls and other toys
- Completes puzzles with 3–4 pieces

Vision

- Does puzzle with three or four pieces.
- Builds towers of six or more blocks
- Screws and unscrews jar lids or turns door handles

Hearing

- Carries on a conversation using 2–3 sentences

Caring for health and development of children aged two up to five years at home

Component 4. Counselling on developmental milestones

3-4 YEARS OLD



Hops



Catches a bouncing ball



Stands on one leg for a few seconds



Can sing a song



Does puzzle with
3-4 pieces



Names colours
and things

Component 4. Counselling on developmental milestones

Child development reflects brain and other bodies' systems development.

Development milestones refer to how your child plays, learns, speaks, acts and moves. They offer important clues to your child's development.

At 4 up to 5 years

- Would rather play with other children
- Can sing a song
- Understands the idea of counting
- Can draw a body with 2-4 body parts
- Hops and stands on one foot for a few seconds
- Catches a bouncing ball
- Can name some games and colours
- Can say first and last names

Vision

- Names colours
- Catches a bouncing ball

Hearing

- Sings

Caring for health and development of children aged two up to five years at home

Component 4. Counselling on developmental milestones

Engage your child in active games



Replace sedentary screen time by storytelling and looking at pictures, singing, playing puzzle, etc.



Child should have regular sleeping habits and calming bedtime

Component 4. Counselling on developmental milestones

Effect of physical activity and good quality sleep on growth and development

Physical activity

- Make physical activity routine in your child's life for a healthy growth and development.
- Your child should spend at least 180 minutes a day on moderate to vigorous exercise.
- Activities can include standing, walking holding your hand or walking alone, running, throwing a ball to another family member, dancing.
- Competitive sport is not recommended. The emphasis should be on enjoyment, play, and providing opportunities to learn basic movement skills like walking, jumping, throwing, catching and kicking within a non-competitive environment.

Reduce sedentary restraining time to a minimum

- Do not restrain your child in prams/strollers or high-chairs, strapped on your back or overwrapped, for more than one hour at a time, and do not encourage your child to sit still for extended periods. Sedentary time results in reduced communication with family members and can lead to language delays, reduced attention and lower levels of school preparedness.
- Sedentary screen time (watching TV or videos and playing on computers) or engaging with digital technology for more than an hour a day, and for non-educational purposes, should be avoided. Co-view with your child, and discuss what you watch.
- Parents should be role models: replace screen time with physical activity, walking to shops, or taking the child to a park to play, and spend leisure time on outdoor activities.

Good quality sleep

- Good quality sleep plays an essential role in growth and development. Children this age need 10–13 hours good quality sleep, inclusive of naps, with regular sleep and wake-up times.
- Good quality sleep provides the energy children need to be active. A well-rested child is an active child.
- Offer a regular routine and calm environment in which to sleep.
- Keep electronic screens out of children's bedrooms.

Caring for health and development of children aged two up to five years at home

Component 4. Counselling on developmental milestones



Motivate the child for potty training



Pretend play will facilitate toilet training



Try to use elements of play
as pretend play will facilitate
toilet training

Component 4. Counselling on developmental milestones

Toilet training

Summer months are best for toilet training. In warmer weather children need to go to the toilet less often, and tend to wear fewer clothes, which simplifies the process. You should also teach your child some relevant words and phrases for going to the toilet – for example, pee, poo and I need to go.

To encourage your child to use the potty:

- When you change nappies put the soiled nappy in the potty to help your child understand what the potty is for.
- Put her/his favourite toy on the potty and praise the toy: your child may then imitate the toy (play simple pretend).
- Walk your child to the potty at regular intervals throughout the day, including just before going to bed for the night.
- Do not offer liquids or snacks after dinner.
- Complete one final potty mission before bed.
- Wake your child halfway through the night to see if s/he wants to pee.
- If your child does not wee or poo after 3–5 minutes of sitting on the potty take her/him off. It will feel like punishment to your child if you make her/him sit on the potty for long periods of time.
- If initial training does not work do not be disappointed. Be patient, and try again.
- Identify things that might motivate your child. They may include special foods, drinks, or toys.
- Make sure your child is eating plenty of fiber and drinking lots of water so s/he does not get constipated. Constipation makes toilet training harder.

Gradually train your child to use the toilet rather than the potty.

Children will stop using diapers by the age of three and a half – four years old. By that time, they should have good toilet training. If not trained yet, advise the mother on toilet training.

Caring for health and development of children aged two up to five years at home

Component 5. Counselling on care for development



Teach your child to count



Teach your child to match colours



Teach your child to copy what you are doing



Teach your child to catch a bouncing ball



Children can do puzzles with a greater number of pieces



Sing and read stories and show your child pictures in picture books



Component 5. Care for development (play and communicate with the child)

Age	Play activity	Communication activity
2-5 years	<p>Children two years and older can name things and count.</p> <p>Help your child to learn to count by asking how many. Also ask what is this?</p> <p>Be patient, children learn by repeating games.</p> <p>Teach your child to draw lines, circles and other shapes.</p> <p>Teach your child to match colours, shapes and sizes. Ask your child to bring you the red ball or the green ball, for example.</p> <p>Help your child to compare things.</p> <p>Teach your child to do puzzles with more pieces.</p>	<p>Children at this age listen and understand: ask your child simple questions, listen to the answers and encourage her/him to talk, such as asking her/ him what is this? Where is your brother?</p> <p>Teach your child stories, songs and games to encourage the child to talk.</p> <p>Look at picture books and talk about the pictures.</p> <p>Answer your child's questions with patience: they are trying to make sense of the world.</p> <p>Children copy what older people do, so use this to teach them.</p> <p>Children can understand what is right and what is wrong: tell them stories to illustrate the difference.</p> <p>Children learn best when they are taught gently. Do not scold, and do not make them feel ashamed.</p>

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries



Don't smoke at home
Smoke inside the home may cause lung irritation and suffocation



Don't leave a hanging rope that the child could hang her/himself and suffocate



Don't leave plastic bags in the reach of your child, s/he could suffocate

Component 6. Counselling on prevention of accidents and injuries

Suffocation

- Smoke inside the house irritates lungs and may lead to suffocation. If you use charcoal or wood for cooking, do so outside the house.
- Tobacco smoke is harmful to those who smoke and those who inhale cigarette smoke passively. The smell of tobacco smoke remains on clothes and bodies and irritates the lungs. Keep children away from smokers and places where people smoke. Do not smoke inside your home or car, or anywhere near your child, even when outside. Take a shower and change your clothes before touching your child if you have been smoking, or you have been in a place where people smoke.
- Children can suffocate by covering their head with a plastic bag. Do not leave plastic bags within your child's reach.
- Playing with rope is also a danger hazard. Do not leave ropes within children's reach.

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries



Don't let your child run while eating



Don't leave small objects within the reach of your child.



If your child is choking

- Sit down and lay the child's face down along your thighs, supporting the head with your hand
- Give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades

Component 6. Counselling on prevention of accidents and injuries

Choking is a common cause of injury and death in children.

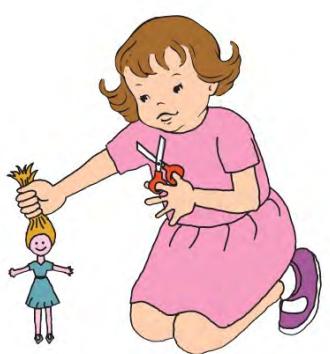
- Children walk and can easily reach for small objects.
If they then place the object in their mouth they can choke.
Keep harmful and small objects out of your child's reach.
- Children can choke if they eat while running.
Your child should eat at set times together with the family.
Teach your child discipline of mealtime by setting times for all the family to eat around the table altogether.

If an infant is choking, teach the mother or father to:

- Sit down and lay infant's face down along their thighs, supporting the head with one hand.
- Give up to five sharp back blows with the heel of one hand in the middle of the back between the shoulder blades.

Caring for health and development of children aged two up to five years at home

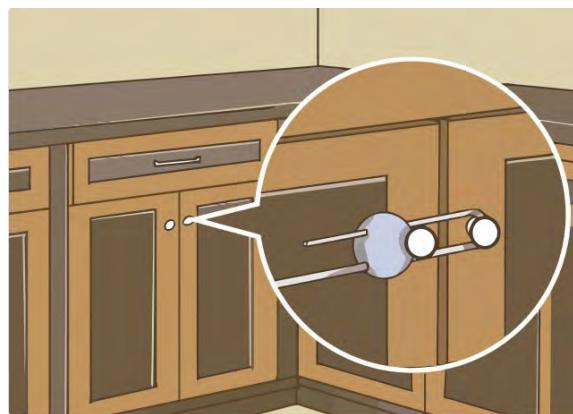
Component 6. Counselling on prevention of accidents and injuries



Don't leave sharp object within the reach of the child or thrown on the floor



Keep the floor clear of harmful objects such as knives, scissors, pins, or broken glass



Attach locks to cabinet doors and keep sharp objects into it



Supervise the child, s/he may be wounded by handling objects

Component 6. Counselling on prevention of accidents and injuries

Wounds

- Keep the floor clear of harmful objects such as knives, scissors, pins, or broken glass, and ensure your child wears shoes or slippers.
- Do not leave sharp objects within the reach of the child. Keep them in a place your child cannot access. Children can insert sharp objects in their ears and eyes and cause serious injuries.
- Regularly trim fingernails using the convenient scissors.
- The child is curious, s/he may try to move objects like a ladder, to play with or to reach for toys. Your child could be seriously injured if a ladder or other heavy pieces of furniture (like a chest of drawers) or appliances (like a fridge or big TV screen) topple over on her/him.
- Closely supervise your child to avoid such accidents. Secure your furniture with straps or anti-tip brackets.

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries



Always supervise your child. Teach your child to hold on to the banister. Don't let the child slide down the banister. Place safety gates around stairs and other dangerous areas



Never leave windows open or place furniture near windows. Install window guards where necessary



Keep the ground clean of objects and slippery things



Children can climb furniture. Supervise them.

Component 6. Counselling on prevention of accidents and injuries

Falls

- Children can climb up and down stairs. If left unattended they may slip and fall. Teach your child to go up and down stairs holding on to the banister. Do not leave your child unattended.
- Fix a wooden safety gate at the top and bottom of stairs.
- Children can fall from open windows. Never place furniture on which the child may climb by a window. Close windows with locks and, if necessary, install window guards.
- Do not leave toys and other objects on the ground. Your child may trip. Make sure the floors are not slippery. Always keep the house tidy, with everything in its place.
- Children can climb on furniture that can then fall on them. Watch your child closely around furniture. Small children can be seriously injured or killed if large furniture (like a chest of drawers) or appliances (like fridges or TVs) topple on to them.

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries

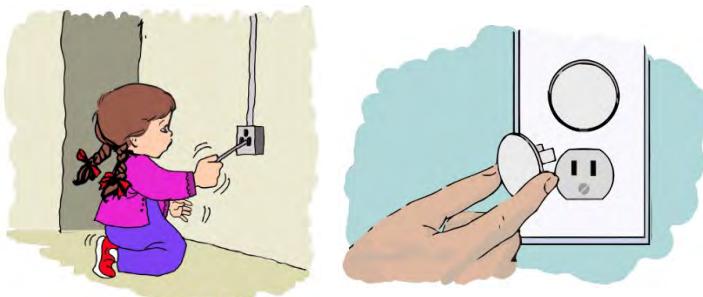
Don't put cooking appliances on the edge of a cooker or table. Put them far from the child's reach with the handle turned away from them.



Test temperature of water, if hot it may scald the child



Always keep an eye on your child; never leave a hot iron within their reach



Cover electrical sockets as a child may try to insert objects into them; they will get an electric shock



Always keep an eye on your child: don't leave match boxes within their reach as they are curious and like to play with fire

Component 6. Counselling on prevention of accidents and injuries

Burns

- If bath water is too hot your child can be scalded. Test water with your elbow before bathing your child to make sure it is warm.
- Children's delicate skin is prone to sun damage. They are easily dehydrated and overheat in hot weather. Limit exposure to the sun when it is hot and keep your child in the shade when possible. Have plenty of water available and encourage your child to drink every 20 minutes.
- Monitor your child around any open flame. Never leave the child unattended, s/he can reach for any source of fire.
- Teach your child that fire is dangerous and can never be touched.
- Children are curious and like to explore things. They may stick small objects like keys or toys in electrical outlets. Place covers over electrical outlets and make sure power cords are in good condition and have no exposed wiring.
- Never leave match boxes within reach of your child. Never play with lighters or matches in front of your child.
- Never place hot drinks or harmful objects at the edge of a table, or cooking pots on the outer edge of the stove. Your child may reach and pull them over her/himself.
- Keep an eye on your child while ironing. Place the hot iron out of your child's reach.

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries



Don't leave the child unattended in the adult tub to avoid drowning



Cover the toilet and close bathroom door to avoid drowning



Don't leave the house door open. If unattended, the child may go out alone and may drown in a nearby lake or a river

Component 6. Counselling on prevention of accidents and injuries

Drowning

- Never leave your child alone in the bathtub. Children can drown in any depth of water, and it can happen in a few moments. Don't be distracted when you bathe your child. Get everything you need before the bath.
- Children can drown in the toilet.
- Do not leave your child unattended. Cover the toilet and close the bathroom door.
- Supervise toddlers closely around any body of water, whether it is a well, river, lake or just a full bucket. Always keep the door closed and consider fencing in the front yard to keep your child from wandering outside.

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries



Place medicines, detergents and insecticides where your child cannot reach them



Component 6. Counselling on prevention of accidents and injuries

Intoxication (poisoning)

- Your child at this age can walk and s/he is curious and likes to explore things. Never leave medicines, detergents, or insecticides where your child can reach them.
- Watch to make sure your child does not put anything hazardous into her/his mouth. Many plants are poisonous, and small stones can cause your child to choke.

Caring for health and development of children aged two up to five years at home

Component 6. Counselling on prevention of accidents and injuries



Never leave the door of your house open as your child could get hurt in the street



Never leave your child alone in the street.
Hold your child's hand and keep her/him always in sight



Check playground equipment is safe

Component 6. Counselling on prevention of accidents and injuries

Accidents outside the home

- The best way to keep children safe outside is to keep a close eye on them.
- Always hold your child's hand in the street.
- Teach your child basic road safety. Tell them to look both ways for cars when crossing the road, and stress that they must never run into the street.
- Always keep the house door closed and consider fencing in the front yard to keep your child from wandering into the road.
- Watch over your child and be prepared to grab her/him quickly if they try to dart into the street.

Playground accidents

- Playgrounds are great for toddlers but they can lead to injuries if not used correctly. Always keep your child within arm's reach when they are using playground equipment.
- Check playground equipment is in good condition, and that the ground material installed (mulch, wood chips and sand are best) will not injure the child.

Caring for health and development of children aged two up to five years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Offer nutrient-rich and safe food



Console your child when s/he cries



Never discriminate between siblings

Component 7. Counselling on prevention of maltreatment, neglect and violence

Maltreatment and neglect negatively impact on brain development during infancy and early childhood, and on your child's subsequent physical, cognitive, emotional and social growth and development.

Nutrition

Offer healthy nutrient-rich food and supervise your child while eating. This demonstrates affection.

A malnourished child is a neglected child.

Emotional development

- Crying means your infant feels unsafe or is in pain. Responsive parents show their child that s/he is loved and cared for.
- Do not discriminate between boys and girls or between siblings in playing and communicating, or in timely care seeking. To do so negatively affects children's development. By not discriminating you help develop healthy bonds between family members and promote the healthy development of your children.
- Blaming, belittling, shouting at or beating your child can damage physical, mental, moral and social health and development. It can undermine the relationship with parents who are supposed to be a source of safety and security.

Caring for health and development of children aged two up to five years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Early care-seeking



Care for child hygiene



Don't be distracted from your child, play and communicate. Spend time with your child.

Component 7. Counselling on prevention of maltreatment, neglect and violence (2)

Nurturing

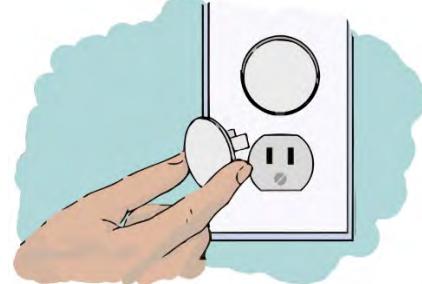
- Play and communicate with the child to stimulate the psychosocial development of your child.
- Pay attention to your child. Do not spend most of your time distracted. Give your child much of your time.
- Train and teach discipline instead of punishing the child. This helps children develop judgement, self-control and reinforces positive social conduct.

Health and hygiene

- Early care-seeking: when the child does not feel well, seek care from a health facility where there are qualified health care providers.
- Rational use of antibiotics. Give your child prescribed treatments. Do not administer unprescribed antibiotics.
- You should care for your child's hygiene. A clean child, with clean clothes and clean toys, signals the mother is taking good care of her/him.

Caring for health and development of children aged two up to five years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence



Keep your infant safe from harm (safe shelter and living conditions)



Component 7. Counselling on prevention of maltreatment, neglect and violence (3)

Shelter and safe living conditions

- Never leave children unattended near open fires or sources of electricity.
- Cover electrical outlets to avoid electric shocks.
- Never leave sharp objects or harmful materials within reach of your child.
- Secure windows and stairs with guards and gates.
- Never leave your child unattended in the bathtub.
- Never leave your child unattended in the playground or street.

Caring for health and development of children aged two up to five years at home

Component 7. Counselling on prevention of maltreatment, neglect and violence

Train your child on discipline. Do not punish



Disputes and violence among families affect a child's mental health and child happiness

Component 7. Counselling on prevention of maltreatment, neglect and violence (3)

Shelter and safe living conditions

A home where your child is safe from harm, surrounded by a family giving her/him love, attention, and opportunities to learn, and where other siblings are well treated, will have a lasting positive effect on your child's social, emotional and cognitive development.

- Avoid violence and maltreatment of children and family members.
- Blaming, belittling, beating or shouting at the child may have a high probability of damaging child's physical, mental, moral and social health, development, survival and dignity. In addition, it will affect relationship with parents who are supposed to be the source of safety and security.
- Treat the child nicely, don't shout at her/him and don't hit her/him.
- Train and teach the child on discipline instead of punishing the child to help them develop judgement, self-control and positive social conduct.
- Violence in family between parents or broken family, results in child or adult mental ill health, unhappiness, loneliness or tension.
- Bad relations and violence between parents or other family members distress children and the negative experience will last as they grow, affecting social, emotional and cognitive development.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. Checking for the presence of danger signs



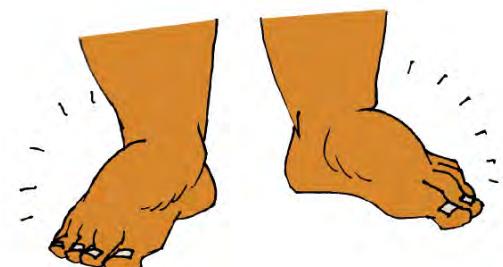
Bleeding



Severe abdominal pain



Severe headache



Excessive swelling of hands and feet



Fits



Fever

Care for mother's health at home

I. Care for pregnant women

Danger signs

- Vaginal bleeding is a danger sign that may indicate miscarriage.
- Fever is a sign of infection. If it appears, it is a danger sign.
- Severe headaches, blurred vision and fits are danger signs indicative of high blood pressure.
- Difficulty in breathing is a danger sign that could indicate a serious health condition.
- Severe abdominal pain: another danger sign that may indicate bleeding inside the womb.
- Sudden release of water from the vagina any time during pregnancy; may be a sign of early delivery.
- Swelling: it is normal to have a moderate amount of swelling in the ankles and feet during pregnancy, and mild swelling in the hands, but facial swelling, and excessive or sudden swelling of feet and hands, are signs of high blood pressure.

If any of these signs appears, you have to go urgently to a health facility to seek care.

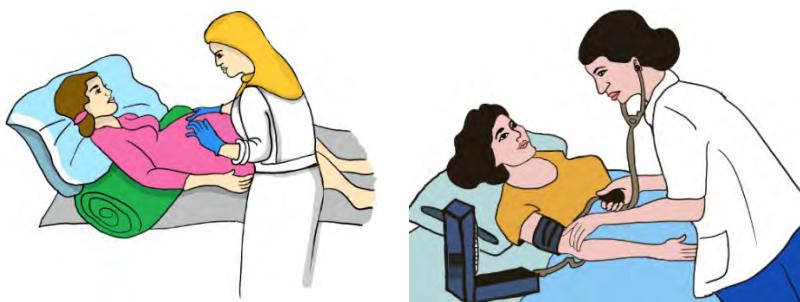
Use your recording form to check for danger signs. If any danger sign is present, skip all tasks and refer mother urgently to health facility.

If not present, teach the mother the danger signs, if any appear she will know that she has to go urgently to a health facility.

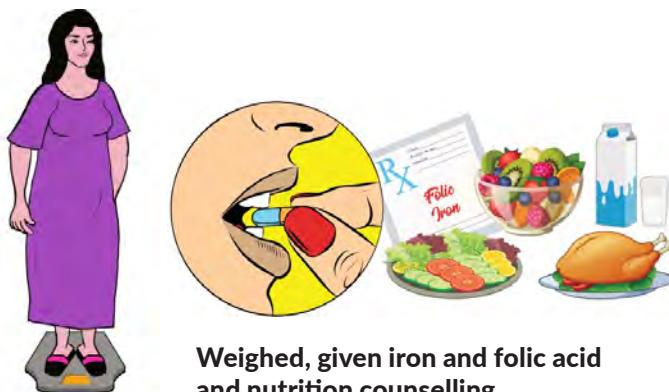
If any danger sign is present, skip all tasks and refer the mother urgently to a health facility

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. Counselling on antenatal care



Physical examination, prevention and treatment of any existing health problems and complications



Weighed, given iron and folic acid and nutrition counselling



Vaccination against tetanus



Counselling on baby care, breastfeeding and preparation for delivery

Care for mother's health at home

I. Care for pregnant women

Counselling on antenatal care

- Eight visits to a health facility should be made through the course of pregnancy.

During the visits, you will be:

- examined to prevent and treat any existing or potential complications and health problems.
- weighed and receive nutrition counselling.
- provided with iron and folic acid to protect yourself and the baby.
- vaccinated against tetanus.
- informed about how to care for the baby and breastfeed her/him
- helped to prepare for delivery.
- counselled on physical activity.

Ask the pregnant woman if she is receiving antenatal care. If not or she does not know about it, counsel the mother on the importance of visits to a health facility and urge her to go for those visits.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. 3. Counselling on prevention practices



Avoid



smoking and tobacco users



sick people



unnecessary medicines



mosquitoes by sleeping
under insecticide-treated
bednet



chemicals and pesticides

I. Care for pregnant women

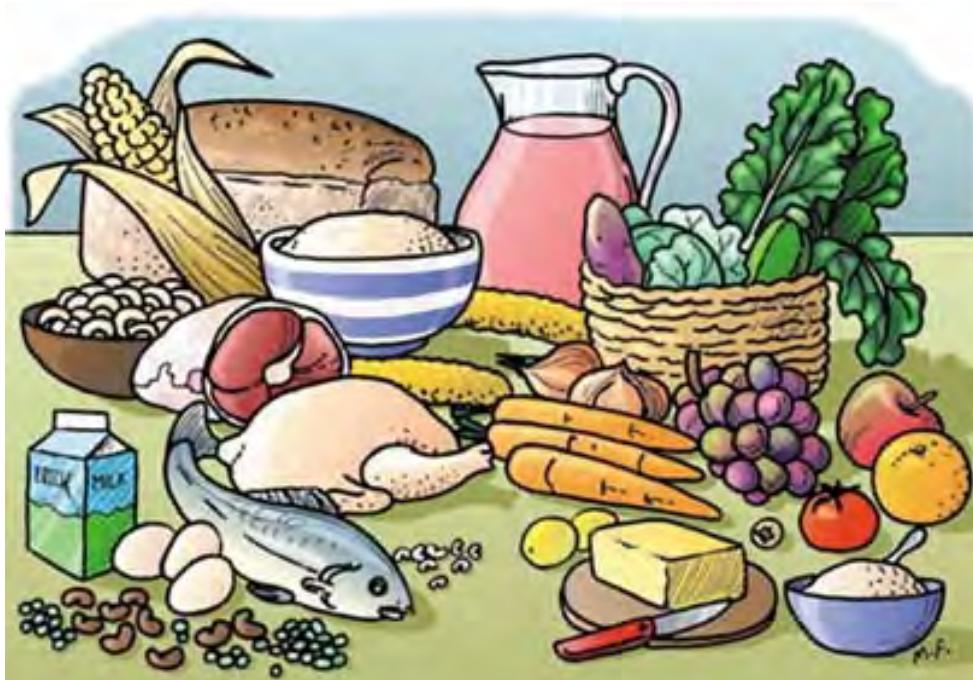
Counselling on prevention practices

Things to avoid

- Avoid smoking, whether active or passive, alcohol and other drugs. They are harmful to you and pass through your blood to your baby. They can cause permanent damage to the baby's brain and body. Family members should stop smoking at home.
- Avoid sick people to reduce the risk of getting sick yourself. Some diseases are particularly harmful to you and your baby. Rubella, for instance, can cause deafness and heart problems in your baby.
- Avoid unnecessary medicines. They can pass through your blood to the baby. Some medicines are safe for adults but can cause birth defects and other harm to babies. Avoid any medicine that has not been prescribed by a trained health worker.
- Avoid chemicals used for cleaning or to kill pests. They can cause miscarriage, birth defects and cancer.
- Avoid mosquitoes, and sleep under a mosquito bednet. Malaria can result in babies being severely underweight, or cause anaemia and miscarriage.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. 3. Counselling on eating and drinking



Eat a healthy nutritious diet



Drink plenty of water

I. Care for pregnant women

Counselling on eating and drinking

Drinking

Drink plenty of clean water every day. Fruit juices, animal milk and many herbal teas are all good to drink.

Ask about family food and advise accordingly

Eating

- If you eat well during pregnancy, your baby will grow and develop well before birth, and be born with a healthy weight. The period from pregnancy through the first two years of life is very important for the growth and development of children.
- You should eat a well-balanced healthy diet. Consume a variety of high-protein and high-energy foods such as meat, milk, fish, oils, nuts, seeds, cereals, beans, cheese, and green vegetables, to keep you and your baby healthy and strong.
- You need to eat more than usual. The extra food will give you energy and help your baby grow.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. 3. Counselling on caring for hygiene

1. Washing hands



Step 1



Step 2



Step 3



Step 4



Step 5



Step 6



Step 7



Step 8



Step 9

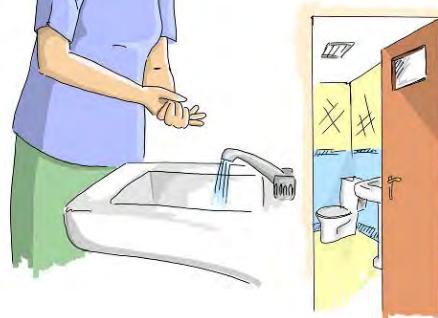


Step 10



Step 11

REMEMBER TURN OFF THE TAP WITH A TOWEL, NOT WITH YOUR HAND.



When to wash hands



I. Care for pregnant women

Prevention practices: hygiene

Hand washing helps prevent the spread of infections. It can prevent major childhood illnesses like pneumonia and diarrhoea, the most common killers of children under five.

Handwashing with water and soap removes germs from hands.

If a house does not have bathroom with water supply and basin, advise and assist families to create a place for hand washing. This should have a wash basin, a container for water, and soap (or a local substitute).

When should you wash your hands?

- After changing diapers or cleaning up a child who has used the toilet;
- Before touching the child;
- After using toilet;
- Before preparing food;
- Before eating;
- Before feeding a child;
- Before and after caring for someone who is sick;
- After blowing your nose, coughing, or sneezing;
- After touching an animal, animal feed, or animal waste;
- After touching garbage.

How should you wash your hands?

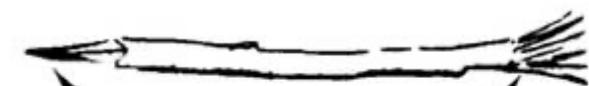
1. Wet hands with water
2. Rub wet hands on soap, covering the hand with soap
3. Rub palms together
4. Rub back of each hand with the palm of the other hand keeping fingers interlaced
5. Rub palm to palm with the fingers interlaced
6. Rub back of the fingers with the fingers interlocked
7. Reach each thumb clasped in opposite hand using a rotational movement
8. Rub the tips of the fingers in the opposite palm using a circular movement
9. Rub each wrist with the opposite hand
10. Rinse the hands with water
11. Dry thoroughly with a clean towel

Remember to turn the tap off with a towel, not with your hands.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. 3. Counselling on caring for hygiene

Clean teeth with toothbrush or dental stick



Sharpen this end to clean between the teeth
Chew on this end and use the fibres as a brush



Wash hands before preparing food, wash fruits and vegetables and utensils and cover food

I. Care for pregnant women

Counselling on caring for hygiene

Bathe daily

During pregnancy you sweat more and due to hormonal changes have more vaginal discharge. You may be more vulnerable to infection by germs. Keep your body clean by taking a daily bath to help prevent infection.

Dental hygiene

Swelling and increased sensitivity in gum tissues can occur during pregnancy. Clean your teeth regularly with a dental stick or a toothbrush and toothpaste.

Food hygiene

Fruits and vegetables should be washed properly and utensils should be clean. Ensure the food is fully cooked before eating. Cover food to prevent flies reaching it.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. Counselling on emotional and psychological support to pregnant women

Pregnant women may feel sad, anxious or depressed



Give the pregnant woman time to rest by doing house chores or taking care of older children



I. Care for pregnant women

Counselling on emotional and psychosocial support to pregnant women

Pregnancy is associated with changes in psychological functioning. Frequent mood changes, anxiety, fatigue, sleeplessness, and exhaustion can occur. Depression during pregnancy may lead to low birth weight and the early stunting of children.

Counsel the pregnant woman

- Don't expect too much from yourself: be realistic about what you can do; rest when you need to.
- Try not to make major changes such as moving house or changing jobs unless you absolutely have to.
- Eat regular healthy meals.
- Keep physically active but do not exhaust yourself.
- Spend time with people who make you feel relaxed and good about yourself.
- Accept help if it is offered to you, and ask for help when you need it.
- Avoid hard physical work and chores and avoid carrying heavy weights.
- Avoid using drugs to reduce stress.

Counsel the partner and other family members

- Offer to spend time looking after older children and help with housework.
- Try to maintain good communications. Listen to the expectant mother to find out what you can do to help.
- Ensure the mother eats well, gets enough rest and exercises regularly.
- Be available to talk, even if it is checking in over the phone.
- Allow the expectant mother to rest and ensure she does not do heavy household chores.
- Surround her with affection, and appreciation of her future role as a mother.

Caring for health and development of children aged one up to two years at home

I. Caring for pregnant women. Counselling mother on caring for newborn



KEEPING BABY WARM AND SKIN-TO-SKIN CONTACT



Early initiation of breastfeeding

I. Care for pregnant women

Counselling mother on caring for newborn

Keeping newborns warm

- After birth, babies cannot adjust their temperature like adults.
- You must keep your baby warm.
- If your baby's body temperature falls it may prove fatal.

Use your final visit to the expectant mother to counsel on caring for the newborn

Early initiation of breastfeeding

- Breast milk is the best and cleanest food for your baby.
- It contains all nutrients s/he needs to grow and develop healthily.
- Breastfeeding should start within the first hour after delivery, and as soon as the baby is ready.
- When your baby opens her/his mouth, turns its head to search for the nipple or sucks on her/his fingers or hand, your baby is ready to breastfeed.

Caring for health and development of children aged one up to two years at home
II. Caring for mother after delivery. 1. Checking for the presence of danger signs



Excessive bleeding



Fever



Headache



Difficult breathing



Severe abdominal colic



Calf pain

II. Caring for mother after delivery

Checking for the presence of danger signs

- Heavy vaginal bleeding: while some bleeding is normal after birth it decreases within days and the colour of the discharge becomes less red. If you suffer from heavy vaginal bleeding and have to change pads many times a day, it is a danger sign.
- Fever is a sign of infection.
- Severe headaches, blurred vision and fits are indicative of high blood pressure.
- Difficulty in breathing could indicate a serious health condition.
- Severe abdominal pain may indicate bleeding inside the womb.
- Calf pain in the calf muscles may be caused by blood clots of the big veins that can be fatal.

Use your recording form to check for danger signs. If any danger sign is present, skip all tasks and refer mother urgently to health facility.

If not present, teach the mother the danger signs, if any appear she will know that she has to go urgently to a health facility.

If any danger sign is present, skip all tasks and refer the mother urgently to a health facility

Caring for health and development of children aged one up to two years at home

II. Caring for mother after delivery. 1. Checking for the presence of danger signs



An examination to rule out problems



Nutrition counselling



Advice on family planning



Counselling on breastfeeding

II. Caring for mother after delivery

You should go for postnatal visits to a health facility.

They are important for your health and for that of your baby.

There should be three visits:

1. 48 hours after delivery
2. one week after delivery
3. six weeks after delivery.

During these visits:

- A health professional will examine you and your baby to rule out any problems.
- You will be given iron and folic acid tablets to prevent anaemia caused by blood loss during delivery.
- You will be advised on family planning.
- Your baby will receive due vaccinations.
- You will be counselled on nutrition.
- You will be counselled on breastfeeding.
- You will be counselled on hygiene and care for your baby.

Ask the mother if she had postnatal visits:

- If yes, praise
- If not, advise her on the importance of postnatal care and urge her to go to the health facility

Caring for health and development of children aged one up to two years at home

II. Caring for mother after delivery. Counselling on eating and drinking



Drink plenty of water and eat a healthy nutritious diet

Take iron and vitamin supplementation prescribed to her



II. Caring for mother's health after delivery

Counselling on eating and drinking

You should drink plenty of liquids

- It is necessary for breastfeeding.
- It compensates for body fluids lost following your delivery.
- Water, milk and fruit juices are all recommended.

You should eat soon after delivery

- Take at least one or two additional meals to ensure you have enough energy to produce breast milk, and that you recover your strength.
- Eat a variety of foods such as meat, milk, fish, oils, nuts, lentils, seeds, cereals, beans, cheese, nutritious vegetables and fruits to keep you healthy and strong.

To counsel mother on her own nutrition, first ask about family food and advice on mother's food accordingly

As part of the community, you will be aware of cultural food taboos about restriction of eating certain foods, which are really nutritious food items, during postnatal and for breastfeeding women. Respectfully, advise against these taboos and that there is no nutritious food item that needs to be restricted.

Talk to family members, particularly the partner, mother-in-law, and other family members, to encourage them to help **ensure the mother eats enough of a wide variety of foods** and avoids hard physical work.

Caring for health and development of children aged one up to two years at home

II. Caring for mother after delivery. Counselling on breastfeeding and family planning



- Explain importance of breastfeeding
- Support early initiation of breastfeeding
- Explain attachment and positioning
- Explain exclusive breastfeeding
- Solve breastfeeding problems



Spacing using contraceptives



A small-size family is a happy family



II. Caring for mother's health after delivery

Counselling on breastfeeding

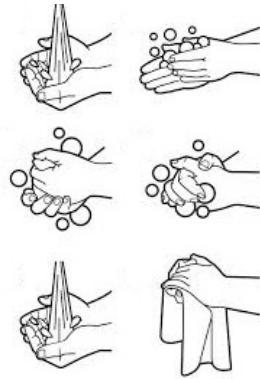
- Explain importance of breastfeeding
- Support early initiation of breastfeeding
- Ensure correct attachment and positioning
- Explain exclusive breastfeeding
- Solve breastfeeding problems

Counselling on family planning

- Having another birth soon increases risk of illnesses and threatens your life and your children's lives.
- Spacing births by at least two years can help you and your baby to be healthier.
- (If mother has other children), with many children you will not be able to take good care of all of them, nor educate them.

Caring for health and development of children aged one up to two years at home

II. Caring for mother after delivery. Counselling on hygiene



Hand washing



Mother should stay hydrated



Breast hygiene



Wash fruits and vegetables

II. Caring for mother's health after delivery

Counselling on hygiene

Good postnatal hygiene is essential

- It can prevent infections for you and your baby; and speeds up the healing process as your body returns to its pre-pregnant state.

Hand washing

- Wash your hands with soap and water before you eat, after washing your child's clothes and after using the toilet.

Toilet hygiene will comfort pain and avoid infection

- After childbirth frequent urination rids your body of the water that has accumulated during pregnancy. This may lead to infection if not cleaned properly and promptly.
- You should clean the genital area from front to back with warm water. Gently pat dry with clean toilet paper.

Use sanitary pads

- Change the pad after every bowel movement.
- Avoid using tampons for the first six weeks. They can lead to infection.

Stay hydrated

- Drink plenty of water to prevent bladder infections due to frequent urination.

Eat hygienically

- Wash fruits and vegetables thoroughly and ensure food is fully cooked before eating.

Take care of your breast hygiene

- A breast infection may spread to the baby.
- Rinse breasts with water after breastfeeding to wash away any saliva. Apply a drop of breast milk to the nipple and allow to air dry to avoid dry nipples and avoid infections.
- Never use soaps, alcohol or lotions on the nipple area. It can cause your nipples to dry and crack.

Caring for health and development of children aged one up to two years at home

II. Caring for mother after delivery. Counselling on psycho-social and emotional support



Mother can feel isolated and depressed



Mother should take rest, family members should support her



Eat a healthy diet



Sleep under insecticide-treated bednet

II. Caring for mother's health after delivery

Counselling on psychological and emotional support

Counsel the mother, husband and other family members.

During the postnatal period mothers require psychological and emotional support from all the family.

Childbirth can leave her exhausted, anxious, because she may feel:

- taken over by the constant demands of the baby who never seems to let her rest or recover her strength
- she has lost the social or work life she used to enjoy
- her relationship with her partner and other children has become strained because of her lack of energy
- in need of more help and support than she is getting alone and unsupported.

This may lead to **postpartum depression**. It is important that mothers:

- receive emotional support and care
- are freed from routine domestic chores like laundry
- avoid physical stress and fatigue
- rest, sleep well and nap while baby naps
- eat a healthy balanced diet
- avoid isolation which can lead to depression
- have someone in the family who can take care of the new baby if the mother cannot or will not.

Sleeping under an insecticide-treated bednet to avoid the serious illness of malaria.

When you arrive at the house, you must ensure mother and baby are not isolated from other family members, and that the mother has the social support she needs. Family members should be encouraged to visit her regularly, and she should be encouraged to keep in touch with family members and friends.

